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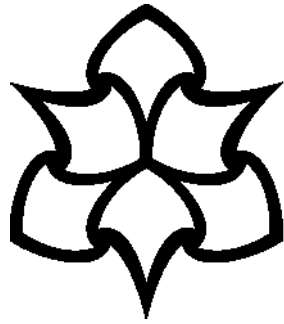
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WHOLE SYSTEM APPROACH FOR WOMEN OFFENDERS FINAL EVALUATION REPORT

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MAY 2018

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TABLE OF CONTENTS

1. EXECUTIVE SUMMARY	6
1.1 INTRODUCTION	6
1.2 KEY FINDINGS AND REFLECTIONS	6
1.2.1 DIVERSION FROM CHARGE, COURT AND CUSTODY	7
1.2.2 PROVEN (RE)OFFENDING	8
1.2.3 WHAT IT OFFERS TO WOMEN	8
1.2.4 GREATER MANCHESTER WIDE GENDER RESPONSIVE SERVICE	9
1.2.5 MULTI-AGENCY APPROACH AND PARTNERSHIP WORKING	9
1.2.6 WHO IS ENGAGING WITH THE WOMEN'S CENTRES?	10
1.2.7 SUSTAINABILITY OF THE APPROACH	10
2. INTRODUCTION AND BACKGROUND	12
2.1 THE WHOLE SYSTEM APPROACH	12
2.1.1 KEY FEATURES	12
2.1.2 KEY AIMS	13
2.1.3 WIDER CONTEXT	13
3. METHODS	16
3.1 OVERVIEW	16
3.2 QUALITATIVE METHODOLOGY	17
3.3 QUANTITATIVE METHODOLOGY	17
3.4 (RE)OFFENDING ANALYSIS	17
4. KEY FINDINGS	19
4.1 MULTI-AGENCY APPROACH AND PARTNERSHIP WORKING	19
4.2 GREATER MANCHESTER WIDE GENDER RESPONSIVE SERVICE	22
4.3 ALL STAGES OF THE CRIMINAL JUSTICE SYSTEM	23
4.3.1 POLICE REFERRALS	24
4.3.2 PROBLEM SOLVING COURT REFERRALS	25

4.3.3 CRC AND NPS REFERRALS	26
4.3.4 THROUGH THE GATE REFERRALS.....	27
4.3.5 A WHOLE SYSTEM APPROACH?	27
4.4 USE OF CUSTODY WITH GREATER MANCHESTER WOMEN	28
4.5 WHAT IT OFFERS TO WOMEN.....	29
4.5.1 CONTEXT OF WOMEN’S LIVES	30
4.5.2 ARRIVING AT THE CENTRE	31
4.5.3 THE SPIRAL DOWNWARDS	32
4.5.4 FINDING SUPPORT AND POSSIBILITIES: THE ROLE OF THE WOMEN’S CENTRES	36
4.6 ANALYSIS OF PROVEN (RE)OFFENDING	39
4.6.1 PROVEN (RE)OFFENDING.....	39
4.6.2 FREQUENCY OF OFFENDING.....	40
5. FUTURE DIRECTION	41
5.1 KEY REFLECTIONS.....	41
5.2 WHAT NEXT FOR THE WSA	42
6. REFERENCES.....	44
7. APPENDIX 1 – FIELDWORK ACTIVITIES	46

1. EXECUTIVE SUMMARY

1.1 INTRODUCTION

The Whole System Approach (WSA) for women offenders and women at risk of offending in Greater Manchester was introduced in September 2014. It builds on a long commitment in Greater Manchester, and nationally, to provide gender responsive support to women in contact with the criminal justice system. Central to the approach are a network of nine women's centres that provide support to women referred via three key points in the criminal justice system; arrest, sentence and release from custody across all ten Greater Manchester local authorities. The WSA is now funded by a partnership between Greater Manchester Combined Authority (GMCA) Justice and Rehabilitation Executive Board and Cheshire and Greater Manchester Community Rehabilitation Company (CGM CRC). In addition, the Greater Manchester Women's Support Alliance were awarded £1,125,000 in charitable donations, which has allowed them to maintain the current service delivery of the WSA and create a number of new posts to support service delivery in line with recommendations from the interim evaluation (Kinsella et al, 2015). The Justice and Rehabilitation Executive has overall responsibility for the governance of the approach, but the Female Offenders Board, which comprises of a range of stakeholders involved in the approach, including representatives from the women's centres are also involved in the governance of the WSA.

During the life of the WSA, there has been considerable change in criminal justice policy with the introduction of Transforming Rehabilitation and the implementation of the Offender Rehabilitation Act in February 2015, followed by the introduction of Transforming Summary Justice in May 2015. We have also seen a national increase in the number of women receiving custodial sentences in this period. Alongside this, there have been significant changes in social welfare reform, with changes to welfare payments and tax credits and the implementation of for example, Universal Credit and the bedroom tax. The implementation of austerity policies across all areas of public spending have also impacted on the lives of women. These changes have presented significant challenges for the operation of the WSA and on the lives of the women accessing the centres. Yet despite this challenging landscape, there has been a sustained commitment to the WSA in Greater Manchester, which delivers much needed support to marginalised women including those in contact with the criminal justice system.

This evaluation provides an analysis of the extent to which the WSA is operating in line with its key features and achieving its key aims.

1.2 KEY FINDINGS AND REFLECTIONS

The evaluation has found that the WSA provides a good example of a gendered approach to supporting women in contact with the criminal justice system or at risk of offending and has been successful in responding to a number of its key aims. These include: creating opportunities to divert women from charge, court and custody; supporting women in ways which reduce their repeat criminalisation; and the provision of safe women-only spaces which can contribute to a reduction in

the damage that involvement in the criminal justice system can have on women and their families. It is doing so by empowering women and improving their wellbeing and safety. Other key features of the approach include providing gender specific support to women across Greater Manchester, at all stages of the criminal justice system, based on multi-agency working, built around the network of women's centres. This summary will now consider the evidence of impact against each of these aims in turn.

1.2.1 DIVERSION FROM CHARGE, COURT AND CUSTODY

Women are referred into the WSA across all points in the criminal justice system. This includes police, court, community supervision and pre-release from custody. The majority of referrals into the women's centres come from police referrals (37%, n=1,241) and CRC (community sentence) (30%, N=998). The introduction of the Liaison and Diversion staff in police custody, although still relatively new, was viewed positively amongst participants in terms of improving the quality and quantity of referrals at arrest or before. It is not possible to assess quantitatively the impact of these roles due to the short time they have been in post.

Whilst the centres are providing much needed support to marginalised women in Greater Manchester, the evidence suggests that women referred at point of arrest, women sentenced via the problem solving court (including those at risk of custody) and women released from prison are not reaching the women's centres in the numbers anticipated. Data made available as part of the evaluation, does not allow us to fully ascertain whether this is an issue of referrals not being made or a lack of engagement by women i.e. not wanting to take up the service. The introduction of the Prison Link Workers in late 2016, may help to address this, however, the data up to March 2017 was not sufficient time to reflect this shift, and therefore this requires further monitoring. Although local data indicates that Greater Manchester may be bucking the national trend, with a drop in the number of women sentenced to custody in the last two years (compared to a national increase), the proportion of women sentenced to immediate custody remains stable at 20-25%. This includes some women sentenced to immediate custody for very short periods, of less than three months (96 women in the most recent 18 months). Thus, the problematic use of short-term custody remains for some women.

At point of sentence, the WSA continues to face challenges in establishing the problem solving court element of the approach. The changing landscape under Transforming Rehabilitation with the split of the probation service into the Community Rehabilitation Companies (CRC) and the National Probation Service (NPS), coupled with the introduction of Transforming Summary Justice (with a focus on speed during the court process) appear to have presented challenges to developing the problem solving court. Whilst changes in the court processes as part of the problem solving court may go some way to address this, evidence would suggest that more radical changes to sentencing legislation for women will be required. As such, the Alliance and their strategic partners such as the Greater Manchester Combined Authority (GMCA) may wish to contribute towards calls for these national changes to facilitate their local goals. Ultimately these ambitions of diverting women at court (via the problem solving court), and reaching more women being released from prison, will require ongoing investment and creative solutions if the project is to fully achieve its aims.

1.2.2 PROVEN (RE)OFFENDING

Notwithstanding the caveats of the (re)offending measure and the limited cohort included in this analysis, the findings indicate that the re-offending rates are lower than would be expected. With 17% (55 out of 316) of the women supported by the project offended and were convicted in 12 months following engagement with the women's centres, compared to national re-offending figures of 30% (drawn from a cohort of 597) for women receiving support from women's centres across England (Ministry of Justice, Justice Data Lab 2015). However, these results and comparisons should be treated with some caution, as it has not been possible to verify either the representativeness of this group of the wider WSA group of women, or the similarities between the local and national groups of women included in the two analyses.

1.2.3 WHAT IT OFFERS TO WOMEN

The women service users who engaged in the fieldwork spoke passionately about the impact of the women's centres in their lives.

"Gave me confidence and I think sometimes when I was really in that dark place coz that first year although I was getting better physically and mentally, my life wasn't getting much better because I was still fighting for my children back. I basically went a hell of a long way chipping away, chipping away before I saw any results...when I was in that really dark place I'd come here [women's centre] and I wouldn't even realise how well I was doing...but I couldn't accept that then because I wasn't capable of being kind to myself...and she'd [support worker at women's centre] really, really encourage me and make me feel better about my day...it's like a community, bit like a home from home...I honestly can't stress how much it's all down to this women's centre. I know that because I've been backwards and forwards to AA for years and not seen a massive improvement in myself because there was missing links" (Service user)

At a time when women are finding it increasingly hard to locate and access support due to cuts and changes in delivery to a range of welfare services, the centres offer a beacon of hope, 'a lifesaver'. At all stages of the evaluation, fieldwork with women using the centres reflected that they provide a safe space, which made them feel wanted and valued, providing them with opportunities to access wider support services and navigate these often complex systems and enabled them to give something back.

"I remember the first day I went into that probation office...I thought this is bad, this is what it's come to, I thought I've got a year of this, I don't think I can cope with this, how degrading and depressing is that going to be and it weren't coz I come here [women's centre] instead" (Service user)

The support from the staff in the women's centres was said to improve women's confidence and reduce their isolation, which impacted on their well-being, ability to deal with future challenges and access opportunities in the future, such as volunteering or educational opportunities. The availability of the women's centres was viewed as particularly significant for women experiencing varying mental health conditions, problematic alcohol use, domestic violence, worries over debt, finances and poverty and severe isolation. The prevalence of these needs is also reflected in the assessment data

collected by the centres. The flexible nature of the support, it not being time-limited, and the positive relationships established with project staff and other women at the women's centres are all cited as important features of the centres.

"I like coming here, I like [support worker] and the women, I like passing on the message that if you're going through the shit it's ok to accept a bit of help. I also like to tell people I got my children back off social services because I see a lot of hopeless women in here...hearing directly from the women's mouth, which I think is always helpful...I find it really, really useful. I get a lot from listening to the other women and sharing experiences" (Service user)

Analysis of the outcome star data also revealed that for a cohort of women (n=806) accessing the centres (those who had an initial and follow up assessment completed), the majority (79%, n=635) of them appear to have experienced positive progress across some of the ten areas of their life that are assessed using the homelessness outcome star tool. It is important to note, these are average figures across all ten areas and there is some variation in the extent of positive change. However, these findings indicate the women's centres are generally successful in identifying the range of needs that women are facing and making positive changes in women's lives. These findings are supported by the testimonies of the women involved in the qualitative fieldwork across the three phases of the evaluation.

1.2.4 GREATER MANCHESTER WIDE GENDER RESPONSIVE SERVICE

Although the WSA is delivering a service to women across the whole of Greater Manchester, there is some variation between the centres. This is in terms of their size (i.e. physical space), staffing levels and the services they provide. This is perhaps inevitable given the difference in organisations, their histories of delivering services to women, their funding, and how long they have been operating. Whilst some agency stakeholders viewed this difference as important to responding to differing needs in the different locations, others raised concerns about the variability, feeling that some women benefited from a greater level of service in certain areas. The extent to which a gender-responsive service can be uniformly delivered was also raised. Although a gendered approach is well embedded in the women's centres and within the ethos amongst their staff, further work to ensure all practitioners involved in the approach work in a trauma informed way was felt to be needed to improve outcomes for women and achieve a key feature of the approach.

1.2.5 MULTI-AGENCY APPROACH AND PARTNERSHIP WORKING

Strong partnership relationships have been established between many of the key criminal justice agencies and the women's centres. These relationships were felt to have improved outcomes for women accessing the services through joint working on sentence plans, which resulted in more personalised and women-centred approaches to planning that respond to the woman as a whole rather than solely as an 'offender'. Additional benefits included partner agencies accessing specialist knowledge and advice via the women's centre staff and in some cases improved relationships between the women and their case managers in statutory agencies. Furthermore, partnership working was viewed as an opportunity to avoid duplication and respond to multiple welfare needs of the

women, potentially reducing the risk of women coming into further contact with the criminal justice system.

As may be expected, partnership working varied dependent on partners understanding, awareness and involvement with the approach. There is still some work to be done in order to communicate the approach to all partners and get them on board to ensure all women in contact with the criminal justice system have the same opportunities to access the support available at the women's centres. Participants also reported a need for improved links with some key partners such as sentencers, mental health and the Department for Work and Pensions (DWP) who they felt were less engaged with the approach in some areas. Although it was recognised that this was likely compounded by austerity and increasingly constrained resources.

1.2.6 WHO IS ENGAGING WITH THE WOMEN'S CENTRES?

Although the women's centres are engaging with a wide range of women and providing much needed support to marginalised women potentially at risk of criminalisation, the centres must remain alert to who is supported by the approach, and more importantly who is not. The data suggests that lower numbers than would be expected of both young women and women from Black, Asian and Minority Ethnic (BAME) backgrounds are accessing the centres. The introduction of the Service User Involvement Workers aims to focus on promoting the engagement and participation of BAME, young women and those with learning disabilities, which may begin to address some of this disparity. Further monitoring of the data will be required to evidence the impact of these roles.

A further tension that exists for the centres is whether they work with *any* woman in need of support or just those in contact with the criminal justice system. Given the experiences of marginalised women, around victimisation of domestic violence, alcohol and substance misuse and living in poverty, all of which could reflect their risk of criminalisation, the support provided is clearly both necessary and beneficial. The women's centres are keen to avoid attaching labels to women and creating divides between those in contact with the CJS or 'at risk' of offending and those who are not. However, constrained resources and funding and the capacity of the centres present challenges in how they continue to respond to this wider group of women and invest in reaching out to women who are most entrenched in the cycle of arrest, court and potentially imprisonment. The concerns of the centres about their ability to respond to increases in referrals is an issue that was raised in earlier stages of the evaluation. This is a challenge that may increase with the introduction of for example, the Liaison and Diversion roles in police custody and the retail diversion scheme in Bury, which is in the process of being rolled out across other areas of Greater Manchester.

1.2.7 SUSTAINABILITY OF THE APPROACH

In order to achieve sustainability the WSA needs to identify a funding model which will allow the women's centres to plan for longer term delivery and provide a more equitable service across the local authorities. Currently the centres rely in large part on charitable funds, alongside an ongoing financial commitment from the Cheshire and Greater Manchester Community Rehabilitative Companies (CRC) and the Justice and Rehabilitation Executive (JRE). It is promising to note the additional funds secured

by the Greater Manchester Women's Support Alliance from the Big Lottery Fund and the Tampon Tax Fund, which have allowed for the continuation of the approach and appointment of new posts to strengthen service delivery, particularly around the 'through the gate' pathway. This points to the key role the Alliance has in driving this approach forward given their ability to secure funding in their own right. However, it is important to recognise that funding derived from charitable sources will usually be time-limited and it may not always be possible to replace these funds. A key premise of the WSA is that criminal justice agencies alone cannot provide all the resources and the necessary approaches to address the root causes of women's offending. As such, criminal justice agencies will not be the only ones to benefit from the positive outcomes achieved from the collective efforts made by partners. Participants reported how critical the strong governance of the WSA will be in driving forward the approach, to ensure it is on the agenda of all partner agencies and that such commitments can lead to locally pooled funding. The Alliance of women's centres has a key role to play in the governance of the approach in order to ensure it is led by those in closest contact with the women using the service. It is only by drawing on their collective expertise, and the voices of the women they are working with, that will ensure the approach is well informed and remains responsive to the changing context shaping women's lives across Greater Manchester.

2. INTRODUCTION AND BACKGROUND

2.1 THE WHOLE SYSTEM APPROACH

The Whole System Approach (WSA) to working with female offenders was initially introduced in Greater Manchester in September 2014. The WSA followed a local and national commitment to gendered provision in the Criminal Justice System, with Greater Manchester contributing significantly towards pilots of these approaches (Clarke, 2003; Hedderman, 2008). From 2012, central funding was made available from NOMS to fund women's centres nationally and this included the three existing centres in Greater Manchester (Women Matta, Together Women and Eves Space). The development of the WSA built on this in order to provide gender-responsive approaches for women across the whole of Greater Manchester at three key points in the criminal justice system; at point of arrest, at point of sentence and at point of release from custody. At the heart of the approach are a network of nine women's centres delivering support across all ten Greater Manchester Local Authority areas. Hereafter in this report, WSA refers to the Whole System Approach and the Alliance refers to the Women's Support Alliance¹. The findings in this report draw on the fieldwork undertaken as part of the final phase of the evaluation (see Appendix 1 for details of specific activities) and some of the key findings from the first two phases of the evaluation. Therefore, this report reflects the various data, both provided by partners and captured within fieldwork. It is acknowledged that, due to the volume, range and continued evolution of the WSA, there may be other work engaged in by the Alliance organisations and their strategic partners, which was not reflected in the data and therefore not captured in the evaluation report.

2.1.1 KEY FEATURES

A number of **key features** of the WSA were identified amongst participants in the workshops and interviews across all three phases of the research. These were described as:

- **Multi-agency approach**, built around a network of women centres enabling improved communication, information sharing and joint working
- **Holistic, person centred** approach looking at the woman as a whole – providing a **gender specific** approach for women
- **Greater Manchester wide** provision, providing support at **all stages** of the CJS²

¹ The Women's Support Alliance consists of nine organisations (Eve's Space, Petrus, POPS, Salford Foundation, Stockport Women, Well Women Wigan, Tameside Women and Their Families, Women MATTA and Women of Worth) delivering services for women in the women's centres across Greater Manchester. Seven organisations held the money for the Alliance, but nine organisations delivered the services.

² The WSA has faced challenges in establishing an operational problem solving court. Furthermore, the women's centres do not currently take referrals from civil cases or where the police are not the prosecuting authority for example, DWP, TV licence, Local Authority education department or Transport for Greater Manchester.

When referring to a multi-agency approach, this not only included the key criminal justice agencies (i.e. NPS, CRC, Police, Prisons and Courts) but also non-criminal justice agencies, including for example mental health services, housing providers and organisations such as the Department for Work and Pensions (DWP). These are the services that may ultimately be working with the same women who would be accessing the women's services as part of the WSA. It is hoped that the new approach avoids unnecessary duplication of work for services and provides a better experience for women. Closely linked to this was the improved communication and information sharing between the different agencies involved. The intention is to offer consistency of approach and prevent silo working, which in turn can provide a genuinely holistic, person centred and gender responsive approach for vulnerable women. This was deemed crucial to all partners, particularly amongst members of the Alliance.

Corston (2007) identified the need for a gender responsive approach as she noted *'there are fundamental differences between male and female offenders and those at risk of offending, that indicate a different and distinct approach is needed for women'*.

In the WSA, a gender responsive approach is viewed as a means through which services recognise the particular needs and lived experiences of criminalised women (Kinsella *et al* 2015). The other central feature of the WSA is that there is to be a common approach with similar services operating across the whole of Greater Manchester. This evaluation report will explore the extent to which these features of the WSA have been fully realised.

2.1.2 KEY AIMS

Underpinning the delivery approach are a number of core **aims**. These are reflected in the bid documents for the pilot and have been repeatedly reflected by key stakeholders during the course of the evaluation. The aims can be broadly divided into two categories (albeit that many of them may be mutually supportive):

- system or institutional aims, and
- aims for the women

The system or institutional aims included **reducing reoffending; diversion** from charge, from court and from custody by creating good community alternatives to prevent the criminalisation of women and the revolving door for repeat offenders; and **cost savings** by reducing the numbers of women going through the courts and saving money by reducing the costs associated with reoffending.

Aims for the women focus on **reducing the damage** that involvement in the criminal justice system can have on them and their families. Participants saw a key aim of the WSA as being to **empower** and **enable** women and to give them a **voice**. Improving **women's wellbeing** and creating a **safe** and **empowering space** were also identified as key aims of the WSA.

2.1.3 WIDER CONTEXT

Central to examining the extent to which the WSA is operating as intended and achieving the aims identified above, is an understanding of the wider context in which the WSA is operating. Since its

introduction, there have been a number of significant changes to both the criminal justice and welfare and social policy, which not only impact on how the model operates but also on the lives of the women accessing the centres. Participants in the workshops spoke about the impact of these policy changes on their lives and working practices. There have also been a number of developments and changes to the WSA. These changes to the context of the WSA are outlined in diagram 1 below.

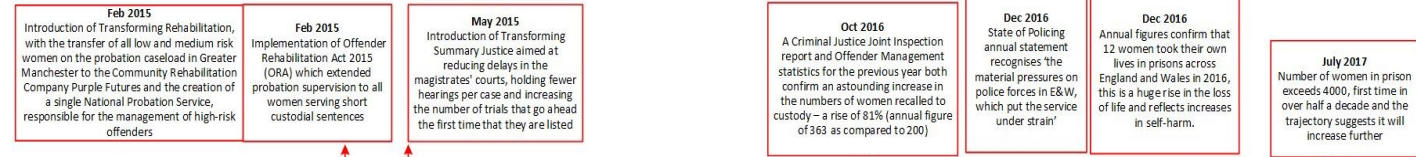
Recent analysis by the independent think tank the Women's Budget Group demonstrates that women have shouldered the majority of the recent government changes to tax and benefits, calculating that 86% of the cuts made under austerity affect women (WBG, 2016). Further it is the poorest women, those taking caring roles or in low paid work, and those from minority ethnic backgrounds who fair worst of all women (WBG, 2016; Runnymede, 2017). For women living in Greater Manchester the economic context of their lives is likely to worsen rather than improve as the implementation of the government's Universal Credit approach to benefits payments rolls out to the remaining Greater Manchester Local Authorities by late Spring 2018. Furthermore, the roll out of the full digital benefits service has left women feeling unsure of where to turn for support.

Alongside this direct impact on welfare payments and tax credits available to them, women in communities of Greater Manchester, like other women across England and Wales, have seen the decimation of services in their local areas. The closure of spaces which have traditionally offered support and advice in relation to financial difficulty and debt, domestic abuse and safety, alcohol addiction or mental health, means that women reported coping with these issues in isolation both from other women and from the direct support of professionals. In this context, the women's centres are a beacon of support to the women who use them.

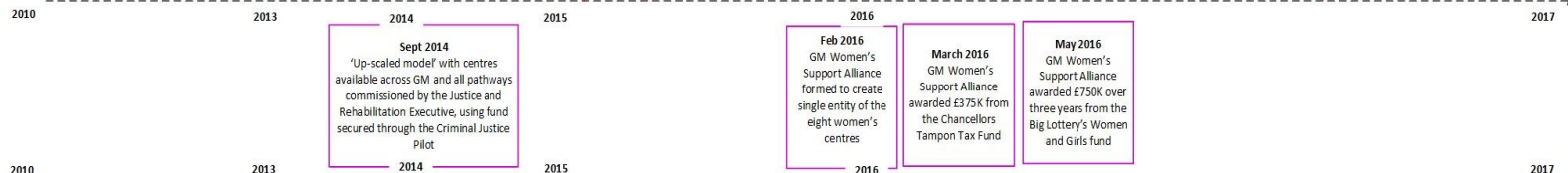
Recent governmental policy changes have also affected the centres, and the practitioners working within them. For example, participants reported the ongoing and intensification of the insecurity of funding of their posts within the criminal justice voluntary sector. Whilst it may feel like change and short-term funding have been a constant of criminal justice delivery, the implementation of both Transforming Rehabilitation and the introduction of the Offender Rehabilitation Act in February of 2015 have intensified this and been the overwhelming backdrop to the WSA implementation. In the last twelve months a number of internal and external reviews of these changes have been published, all of which point to the negative impact of these changes for criminalised women (HMIP, 2016). Despite this, Greater Manchester has remained committed to seeking to increase the consistency and responsiveness to women in contact with the criminal justice system. One indicator of this commitment is the local CRC and Justice and Rehabilitation Executive retaining some financial commitment to the approach.

Diagram 1

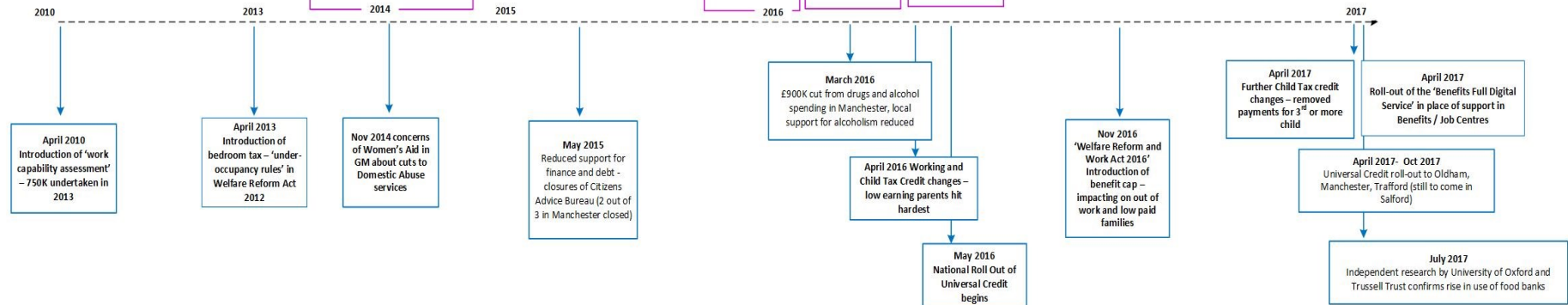
Criminal Justice Reform



WSA Developments



Social Welfare Reform



Universal Credit – Delays in payment being processed has resulted in claimants being left with no income for period, this can lead to increased debt and impacts upon health and well-being of individuals and families.

Universal Credit – The change in welfare assessment and payments to a single payment per household has been challenged as it leaves women who may be experiencing abuse or coercion in relationships exposed. This approach to welfare payments may bind women into damaging relationships.

Cuts to support - Cuts to services arising from reduced public spending over the recent period mean support for women in relation to domestic abuse, alcohol or drugs, mental health, and advocacy for debt or financial difficulties, is harder to access or has disappeared from their local communities.

Digital / Online Services – Women using the centres across Greater Manchester reflected the challenges created by the increased provision of welfare advice, assessment and decision-making via online or digital platforms.

Use of Food Banks – Staff from the Greater Manchester Women's Support Alliance report a significant increase in the numbers of foodbank referrals members are making on behalf of their service user.

3. METHODS

3.1 OVERVIEW

The Evaluation consisted of three phases of work between January 2014 and May 2018. The timeframes for the different phases are outlined below:

- Phase 1: January 2015 to December 2015 (Interim Report December 2015)
- Phase 2: January 2016 to December 2016 (Progress Report December 2016)
- Phase 3: January 2017 to May 2018 (Final Report May 2018)

Phase 1 of the evaluation aimed to explore early implementation and operation of the WSA, governance structures, partnerships and benefits or challenges from the approach. Phase 2 aimed to provide an update on progress, focusing on recent developments in relation to capacity levels at the women's centres, impact of increased referrals and responses to that and developments around the peer mentoring scheme in HMP/YOI Styal. Phase 2 also involved an early analysis of conviction data for women that the WSA had worked with and key learning for that period. The final phase of the evaluation aimed to capture and mobilise learning on the operation of the WSA and the benefits of the approach to working with women in contact with the CJS.

A number of qualitative and quantitative research activities were undertaken across the three different phases and included³:

- Project initiation and documentary review;
- In-depth semi-structured interviews with service users, women's centre project staff, partner agencies, strategic stakeholders, prisoner peer mentors and strategic staff in Styal;
- Two learning workshops;
- A discussion group with women accessing the women's centres;
- Narrative case studies;
- Analysis of project monitoring data;
- (Re)offending analysis (interim (re)offending analysis and full 12month (re)offending analysis);
- Capacity assessment exercise (involving interviews with women's centre project staff to assess perceptions of current caseloads, impact of increased referrals and responses to that);
- Observation of the peer mentoring scheme in Styal

Details of the research activities undertaken across the three different phases and numbers of participants involved can be found in Appendix 1.

³ In phase 2, the research team sought approvals from the Justice's Clerk for Greater Manchester in order to administer a short survey questionnaire for Magistrates and Interviews with Sentencers and Probation staff involved in pre-court/ court work. Unfortunately, despite numerous attempts supported by the GMCA we were unable to engage with any Sentencers.

A Cost Benefit Analysis has been undertaken by members of GMCA to evidence the cost savings of the approach

3.2 QUALITATIVE METHODOLOGY

In-depth interviews were conducted either face-to-face or over the telephone. All interviews were digitally recorded to ensure an accurate account of the interviews and detailed analysis following the interviews. Qualitative data was analysed using a thematic analysis approach where key themes emerging from the data were identified and reviewed by evaluation team members. Participant information sheets were provided to all participants who took part in the interviews, workshops, group discussion and case study interview and written consent was sought. The Narrative case studies involved face-to-face interviews with both the woman accessing the women's centre and project staff working with the women. These interviews lasted between two and three hours and were digitally recorded. We then conducted a thematic analysis on the interviews and developed a draft timeline, which we sent to the women and project staff for review and reflection.

3.3 QUANTITATIVE METHODOLOGY

The women's centres all complete a core monitoring spreadsheet, which collects data on the number of women commencing with the projects, needs, engagement levels, outcomes and numbers exiting the projects. In March 2017, the women's centre migrated to a new database however, due to difficulties extracting data off the new database, we have used the old monitoring spreadsheet for the purposes of this report. Therefore the findings in this report are based on the data collected between 1st September 2014 and 31st March 2017. A number of issues were highlighted in relation to the data reporting. These included:

- Additional responses being added to variable lists;
- Missing data – there were large numbers of missing data across all the variables in the dataset;
- Data being entered incorrectly for example, case closure dates being before start dates or not including valid dates;
- Duplicate entries

There were 3,443 women's records included in the core monitoring spreadsheet. The dataset contained duplicate entries (i.e. having identical values across all variables) or entries prior to the start of the evaluation period that were removed (n=71). There were also a number of genuine duplicates included in the dataset (i.e. women who had been referred to the centres 6 months following their first engagement with the centres). The analysis was undertaken on 3,334 women. The analysis varied due to the completeness of records and duplicate entries.

3.4 (RE)OFFENDING ANALYSIS

A (re)offending analysis was also undertaken for a small cohort of women (n=409). This cohort accounted for less than 15% of all women accessing the centres in the first two and a half years of operation. It was not possible to identify the extent to which this sub-set was representative of all the women accessing the centres, therefore the findings need to be interpreted as only applying to those included in the (re)offending analysis and cannot be generalised to all of the women accessing the women's centres.

The (re)offending analysis included women who attended or were referred to the women's centres before 23rd December 2015. The PNC extract contained convictions and caution types for the women on the Police National Computer (PNC) dataset. The following index offences / offences are used in (re)offending analysis:

- Offences are recordable (therefore excluding for example, motoring offences)
- The offence is not a breach
- The offence was committed in England and Wales

Results from the (re)offending analysis and caveats and limitations relating to the data can be found in section 4.6.

4. KEY FINDINGS

The final phase of the evaluation sought to understand the extent to which the WSA is operating in line with the key features and achieving the key aims outlined in section 2. Following this and *drawing on all the findings across the three phases of the evaluation*, this report seeks to identify potential solutions to the challenges faced by the WSA, considering what is required in order to sustain and develop the approach moving forward. This section sets out an analysis as to the extent to which the key features and aims are being realised⁴ from the perspective of participants and the monitoring and (re)offending data, and the potential challenges and benefits of these.

4.1 MULTI-AGENCY APPROACH AND PARTNERSHIP WORKING

Partnership working with both criminal justice agencies (i.e. CRC, NPS, Police, Prison and Sentencers) and non-criminal justice agencies such as health (particularly mental health), housing and DWP was a key feature of the WSA. In the context in which the WSA is operating - reduced funding, stretched resources and closure of local services - partnership working has emerged as an opportunity to avoid duplication, respond to multiple welfare needs of women and in some cases prevent the criminalisation of women by introducing support at an earlier stage.

In general, participants agreed that the WSA had established strong partnerships. However, as may be expected, this varied across the areas and between the different agencies. There was also some variation in terms of 'buy in' within agencies. Good levels of understanding and engagement with the approach were reported at a strategic level, and where there were staff in specialist roles driving the agenda, for example women concentrators in the CRC, or where staff had been directly involved in developing the approach.

"For those of us who have lived, breathed it, worked strategy modelled it, it works really well...I think it's that wider acknowledgement...I think the WSA really works, I just think there's a little way to go in terms of upskilling everybody in what it actually means...for those that don't work it universally don't have a sound understanding of the WSA" (Partner agency participant)

Those working within the women's centres viewed partnerships as being stronger as a result of co-location, joint working with the women, an awareness of the WSA and the principles of a gender responsive approach. The partners we spoke with viewed these relationships positively, particularly in terms of their value in improving outcomes for the women accessing the services. The benefits of working closely with the women's centre staff included: better relationships between the women and their case managers, derived from seeing the women outside the NPS or CRC office; access to specialist knowledge and support services; and the development of shared sentence plans, that were more personalised, localised and women-centred, as opposed to being solely offence focused.

⁴ A Cost Benefit Analysis has been undertaken by members of GMCA to evidence the cost savings of the approach.

“Historically probation has always been seen as the go to place where everything sits. The WSA has kind of enabled us to creep away from that and in the best way possible has meant that CRC and NPS are a smaller part of a woman’s life and actually the WSA enables women because they can access services that will be in their communities that will fulfil and assist them throughout their life” (Partner agency participant)

Where relationships across partners were less-well established a number of practical barriers were identified. These included the difficulty of spending time out of the office to locate at women’s centres. Such an approach was said to be time consuming and difficult to manage alongside high caseloads, particularly when the volumes of women on caseloads were low (e.g. NPS staff may have 4 or 5 women on their caseloads as compared to 30 or 40 men). However, many practitioners reported a commitment to working in this way *“staff, they believe in this so they make an effort to be at the women’s centres”* (Partner agency participant). High staff turnover could also impact partnership working, requiring repeated investment in building relationships. Whilst partnership work in prison was generally working well, participants reported that it could be undermined by an unplanned decision, for example if a woman was released on a home detention curfew (HDC) with little notice or on executive release. Population pressures in the women’s estate were reported as increasing the numbers of women who were released on HDC, making release planning difficult when information is not communicated between the prison based offender management unit and the community based CRC. In these instances, there were reports of women’s centre staff arriving at the prison to meet a woman who had already been released.

A further barrier to effective partnership working is the number of short term prisoners, with participants reporting women serving sentences as short as two or three weeks, or in some cases two days, with links often not being made with their community case managers prior to release. This is supported in local offender management statistics⁵ where over an 18 month period, 96 women were sentenced to under three months. The problematic use of short-term sentences is well documented (most recently by HMIP, 2016), in particular for women and mothers (Baldwin, 2017). In this context, the WSA has real potential to shape change, by offering an effective alternative to short-term prison sentences. National and local data are analysed in section 4.4 to examine recent trends in the use of custody during the pilot period.

There were also a number of key partners who were felt to be missing or less engaged with the approach amongst participants who took part in the various stages of the evaluation. These included sentencers, health (particularly mental health) and DWP. It was suggested that there was variation in the extent to which magistrates ‘buy-in’ to the model across Greater Manchester, with their interest and commitment being described as ‘hit and miss’. This may be expected given the problem solving

⁵ Local offender management statistics provided by the Greater Manchester CRC and North West NPS teams covering April 2015 to September 2017 (unpublished).

court has not yet been established in all areas. The potential to divert women at court is further explained in section 4.3.2.

Wider stakeholders such as mental health and DWP were also described as not being as embedded as needed. Wider constraints, such as funding cuts and the increasing closure of services such as job centres created difficulties establishing partnerships with these agencies. The limited nature of the support available to women in their local communities is something keenly reflected by the women and practitioners. In some instances, the women's centres were viewed as plugging these gaps in service provision:

"Without mental health services, we can't do a lot of this...the Women's Alliance have commissioned their own key workers who are all trauma informed approach trained. They provide really good assistance in terms of mental health and some of the work they do with them is great, but it's not their statutory responsibility. They've had to commission and they've had to pay out this money themselves, just so women have got a wraparound service, but it's more welfare rather than a medical or structured statutory plan...and the issue of personality disorder is significant. We've got women who are very, very clearly border line personality disorders who literally go in the hard to do box, but there has to be commissioning from mental health services, from the health service to provide mental health...the problem is there is no money for them...can't rely on the women's centres to keep holding them up really" (Partner agency participant)

This reveals the wider, long-standing challenges facing the WSA, which are intrinsically linked to wider changes in national policy and funding. In this context, it will be important to consider how the Alliance and their strategic partners, such as the Greater Manchester Combined Authority (GMCA)⁶, can influence the government agenda on provision of mental health services to women?

Participants agreed there was still work to be done around raising awareness of the WSA. Whilst the role of the JRE⁷ in engaging partners and promoting the approach was acknowledged during the workshops, there was a sense amongst some participants that it fell to the Alliance to 'educate' wider stakeholders and 'drive' the approach. This was challenging as they described having little authority as voluntary sector organisations seeking the buy in from, often, hierarchical statutory agencies.

There were still some reports of 'silo working' amongst participants. Examples of this included the CRC and NPS no longer working as closely together following the changes to the probation service under Transforming Rehabilitation and wider stakeholders, such as mental health working with the same women but in isolation. This is perhaps inevitable as services struggle for funding and become

⁶ The GMCA is made up of the ten Greater Manchester councils and Mayor, who work with other local services, businesses, communities and other partners to improve the city-region. Throughout this report we refer to the GMCA, but previous reports refer to the Public Service Reform (PSR) team as the naming changed during the course of the evaluation. The PSR team were involved in supporting greater integration of local services across Greater Manchester. They have also been a key partner in designing and leading the WSA.

⁷ The Justice and Rehabilitation Executive (JRE) oversee the governance and funding of the WSA.

increasingly stretched. This is an ongoing challenge for the WSA, one that becomes increasingly difficult to resolve with increased austerity:

“not helped by austerity measures where partners and agencies are absolutely clawing for everything they can get just to make it a little bit easier and understandably for their own agency. Unfortunately all that austerity does is it doesn’t enable creativity, all it does is create silos” (Partner agency participant)

4.2 GREATER MANCHESTER WIDE GENDER RESPONSIVE SERVICE

A fundamental aspect of the WSA was to provide support for women across the whole of Greater Manchester, support that was previously only available in four⁸ of the Local Authority areas. The establishment of women’s centres in each of the Local Authority areas has enabled the WSA to achieve this key aspect of delivery. However, there were reports of variation in demand between the areas, capacity of the centres and quality of provision amongst participants. Variation in the numbers of women accessing the different centres may be expected given some centres had been operating for longer than others and thus established relationships with referral agencies and variations in the geographical coverage of the different areas. Similarly, centres varied in size (i.e. physical space), services offered and staffing levels and thus their ability to cope with the number of referrals will be reflected by these differences. Nevertheless, variability in provision was reported amongst participants. There was concern amongst some participants that women were not able to access the same level and quality of service and access to services was perceived to be somewhat ‘post code dependent’, with women in some areas benefiting from access to longer-established agencies with staff who have extensive knowledge and links to other support agencies. This disparity in provision amongst the different women’s centres was linked to unequal resourcing, which ultimately impacts on the facilities and space available, staffing and the level of cover in the different centres. However, despite differences in providers, funding and the maturity of the centres, efforts are made to meet a consistent standard of delivery for all women accessing the services. This was evident in the interim report, which details the range of services on offer at the different centres and reflects the minimum standard of delivery as well as the additional or different services available across them (Kinsella *et al*, 2015). In addition, whilst variation in provision was viewed as a challenge amongst some participants, particularly if women learnt what was on offer in other centres, the interim report described this variation as necessary for responding to the differing needs in different locations (Kinsella *et al*, 2015).

The extent to which a truly gender responsive approach was being delivered was also raised by participants in the workshops. Whilst it was felt the women’s centres were achieving this goal through the work they delivered at the centres, it was not being delivered uniformly across all areas and not all aspects of delivery. There was a view amongst some participants that not all practitioners involved in the approach work in a trauma informed way and it was suggested that there remains a gap in understanding about what makes for a gender specific approach. One example provided is illustrated

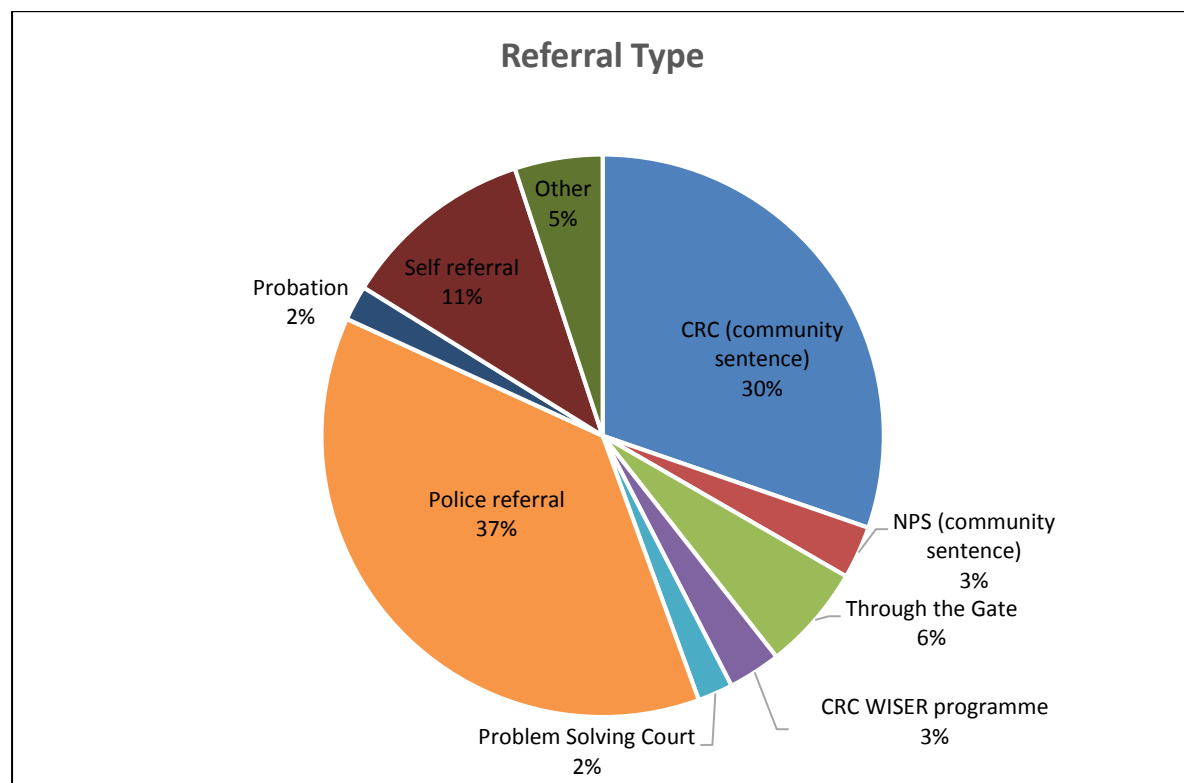
⁸ Women’s centres specifically targeting women in contact with the criminal justice system previously operated in Manchester, Trafford, Bolton and Salford.

in the following quote: “Police say we treat everybody the same which doesn’t result in equal outcomes as Corston pointed out” (Alliance participant). There were reports however, of training being provided to CRC staff around trauma-informed practice.

4.3 ALL STAGES OF THE CRIMINAL JUSTICE SYSTEM

Embedding gender responsive approaches for women and ensuring support from the women’s centres is available at all stages of the criminal justice system; from point of arrest, to point of sentence and point of release from custody is a key aim of the WSA. Analysis of the monitoring data reveals that women are being referred at all these stages of the criminal justice process. The data allows us to further explore the referral rates for the different routes, with the reflections of participants from the interviews and the workshops enabling us to understand how effectively the pathways work. The figure below shows the breakdown of referrals for each of the pathways.

Figure 1: Referral pathways



As can be seen from figure 1, police referrals (37%, n=1,241)⁹ and CRC (community sentences) (30%, n= 998) accounted for the majority of the referrals to the women’s centres in the first two and half years of operation. This may be explained by the long established relationship between the women’s

⁹ The voluntary triage route accounted for the majority of police referrals (30%, n=957) and 4% (n=137) received a conditional caution. A small number of women (n=7) were referred after attending the police station voluntarily for interview following an offence and 4% (n=140) were either recorded as ‘triage’ or ‘police-other’. These may account for retail referrals or from local officers and PCSO’s.

centres and CRC staff (previously probation staff), as discussed by participants. It may also reflect that women attending police custody and those being supervised by the CRC are potentially 'less risky' and have less experience of criminalisation. These figures are in line with the findings from the interim report (Kinsella *et al*, 2015) where the CRC and triage also accounted for the majority of referrals. However, local arrest data¹⁰ shows that 13,592 women were arrested between September 2014 and March 2017, which suggests that a very small proportion (9%) of all women arrested are reaching the women's centres. This requires further investigation to understand the reasons for this. The NPS (community sentence) made up 3% (n=90) of all referrals¹¹. Given the NPS are now responsible for managing high-risk offenders; the numbers of women on their caseloads are low which would account for the low number of referrals. Local data provided by GMCA reveals that 1,266 women received a community order (excluding suspended sentence orders) between January 2015 and March 2017. Although the project monitoring data is for the period September 2014 to March 2017, these figures indicate that the majority (86%) of women receiving a community order are being referred to the women's centres. Just 6% (n=215) of women were referred via the 'through the gate' pathway¹², which is perhaps lower than expected given the introduction of the Prison Link Workers (discussed below). 2% (n=59) were referred via the problem solving court¹³. Beyond the key criminal justice referral pathways, the centres also received 11% (n=363) of self-referrals and 5% (n=170) of referrals from other (non-statutory) agencies.

There are a number of recurrent issues that were said to impact on the effectiveness of the referral pathways, which emerged from the interim report and were raised once again in this final phase of fieldwork.

4.3.1 POLICE REFERRALS

High levels of staff changes were reported in relation to the police, creating barriers to effective communication, and women's centre staff having to continually repeat the same messages to try and achieve 'buy in' of police officers in key custody suite roles. Yet whilst this remains a problem in some areas, others felt that police staff were now more engaged with the WSA and no longer viewed it as the "*latest fad*". The introduction of the Liaison and Diversion (L&D) staff in custody suites in February 2017 is viewed positively amongst all participants. The quantity and quality of referrals were reported

¹⁰ Local arrest data was provided by GMCA.

¹¹ 2% (n=71) of referrals were recorded as 'probation' as the centres were working with women prior to the split into the CRC and NPS services under Transforming Rehabilitation and 3% (n=110) were referred via the CRC WISER programme.

¹² The breakdown of referrals via the 'through the gate' pathway include 4% (n=123) being referred via the CRC, 1% (n=47) being referred via the NPS and 1% (n=45) being recorded as 'prison release', 'during custodial sentence' or 'TTG' so we are unable to identify if they were CRC or NPS referrals.

¹³ 1% (n=37) of the problem solving court referrals were CRC referrals and 1% (n=22) were just recorded as 'problem solving court' so we are unable to identify if they are NPS or CRC referrals.

to have improved significantly since the introduction of these posts¹⁴ and staff indicated a greater willingness amongst women to attend the centres if the referral was made by these L&D staff. This was attributed to the professional background of the L&D staff, being counselling and mental health backgrounds, as distinct to women often just agreeing to attend the centres to generic police officers in order to 'get out the cells'. A further change in relation to police referrals is the introduction of a retail diversion scheme, which was initially rolled out in Bury and is in the process of being further rolled out in three other areas across Greater Manchester. The retail triage aims to provide an early intervention to divert women who have been detained by retailers for shoplifting from the criminal justice system, with a referral to the women's centre for support. It has not been possible to see the impact of this scheme due to the short time it has been in operation and low numbers involved.

4.3.2 PROBLEM SOLVING COURT REFERRALS

Whilst diversion from custody at sentence is a key aim of the WSA, the problem solving court (PSC) has remained the smallest referral pathway and has only been available in three of the areas¹⁵. In the first year of operation it accounted for just 6% of referrals (n=36) and the most recent data suggests 2% of women arrive at the women's centres through this route. The problem solving court, available in the Manchester and Salford magistrates' courts, serving the two women's centres in these areas, offers a specific opportunity for women at risk of custody in those areas to be diverted to a community option.

In the first wave of research, feedback from staff and partners involved suggested that the problem solving court approach provided a 'gold standard' example of innovative systems change. Describing that it enabled a collective approach to assessment, referral and ongoing review, reportedly providing a more effective and efficient approach to integrated working. In addition, a number of partners felt that its presence generated a broader understanding of the importance of gendered responses to criminalised women, and increased confidence that there was potential for alternatives to custody even for those women for whom the routine response was a prison sentence (Kinsella *et al*, 2015).

However, feedback from partners suggests that in recent months it has not been operational, with partners no longer being 'round the table' and CRC staff not working with women at court. In the most recent phase of fieldwork, both staff and other women attending the centres have reflected concerns of 'up-tariffing', that women engaging on release should have been referred to the women's centre prior to the damaging experience of prison.

Given that the problem solving court was described as a "*brilliant service*" in the first year of the pilot (prior to the split of the probation service into the NPS and CRC under Transforming Rehabilitation¹⁶

¹⁴As we only have data up until March 2017, it is not possible to interrogate the data to see if triage referrals have increased following the introduction of the Liaison and Diversion posts.

¹⁵ A problem solving court is delivered in Stockport, however this is not a women's problem solving court.

¹⁶ <https://www.clinks.org/criminal-justice-transforming-rehabilitation/what-transforming-rehabilitation>

and the introduction of the Offender Rehabilitation Act in February 2015¹⁷), why, two years later, has the project struggled to scale-up this pathway, as was intended at that time? It is clear from participants accounts that Transforming Rehabilitation has had a significant impact on the ability to deliver the problem solving court as intended (to provide an alternative to custody for women offenders who are supported by probation and given access to gender-specific support through women's centres). Despite the CRC working with the majority of women, under Transforming Rehabilitation, they are no longer involved in the case prior to sentencing, instead receiving referrals from the NPS, which therefore limits their ability to engage with women at court, particularly pre-sentence. Added to this, Transforming Summary Justice¹⁸ also has the potential to impact on the ability to deliver an effective problem solving court service. Although this did not emerge in the fieldwork, reflecting the challenges we had engaging sentencing stakeholders. It seems logical however that the prioritisation of speed can be a barrier to approaches which seek to engage and reflect pre-sentence, key features of a problem solving court approach. If the potential of this approach is to be realised then further investigation of the reasons for the apparent stalling of the model may be useful, followed by action, including any necessary investment, to build on what was achieved in the first year of the WSA pilot and address challenges created by Transforming Rehabilitation and barriers to attending for partner agencies. Work is currently ongoing to address these challenges. Strategies such as the PSC are widely supported by research, that in order for magistrates to use women's centres they need access to information and examples of their use, in order that they are both aware of and confident in them as alternative options to custody (Birkett, 2016).

Alongside such changes to the working approaches within the court offered by the PSC there should also be consideration of how the Alliance organisations, and their strategic partners such as the GMCA, can contribute to calls for more radical changes to sentencing legislation for women. As research demonstrates, alongside changes to improved support in the community and better court models, legislative changes are required if we are to see real decarceration results for criminalised women (Hedderman, 2012).

4.3.3 CRC AND NPS REFERRALS

As was found in the interim report, there were mixed views on the effectiveness of the CRC and NPS referral pathways amongst participants. Where staff had established relationships with CRC and NPS staff these staff spent time at the centres, were involved in joint-working with the women, and women centres received referrals from these staff. However, it was perceived that the dynamic of the relationship between the women's centre and CRC and NPS staff had changed with the creation of the Alliance. Where previously the women's centres had been viewed as a commissioned service of the CRC and NPS, they are now viewed as a partner and an integral part of the approach. Concerns were expressed in relation to some of the 'craft' activities delivered at the centres, as they were not felt to be offence focused and therefore not suitable for women with serious offending backgrounds. These

¹⁷ http://www.legislation.gov.uk/uksi/2015/774/pdfs/uksiem_20150774_en.pdf

¹⁸ <https://www.justiceinspectorates.gov.uk/hmcp/inspections/transforming-summary-justice/>

perceptions may impact on practitioners' willingness to refer women to the centres. However, the extent to which the women's centres should be expected to deliver offence focused work, which was considered the remit of the NPS and CRC was questioned by other participants. In these instances, the therapeutic benefits of 'craft' activities were cited as a meaningful use of time alongside other criminal justice interventions. In order to ensure case managers are on board and refer women to the centres, they need to understand the model of practice and see the benefits of engaging with the centres. Further training and / or communication may be required to ensure all NPS and CRC case managers have a clear understanding of the approach and 'offer' from the women's centres.

4.3.4 THROUGH THE GATE REFERRALS

Since the publication of the interim report in late 2015, the 'through the gate' pathway was said to have improved by participants. This is likely to be in part as a result of the introduction of the Prison Link Workers in August and September 2016. In addition, Shelter provide a 'through the gate' service as part of the Cheshire and Greater Manchester CRC contract at Styal, which provides resettlement support for women¹⁹. Whilst there are still some challenges around communication between prison based staff and staff in the community and low numbers of women accessing the centres via this pathway, the introduction of the Prison Link Workers was said to have provided a 'through the gate' service which previously felt very much like a 'to the gate' service. In addition, prison based staff highlighted a significant improvement in communication as they reported receiving more information on outcomes once women were released. Although the introduction of the Prison Link Workers (introduced in August and September 2016) were described as providing a more streamlined service and supported pathway for women leaving Styal. The data suggests that there continue to be lower numbers of women (6%, n=215) than may have been expected²⁰ referred via this route.

One approach, which has been explored by strategic partners and practice leads during the pilot, has been the use of prisoners as peer-mentors to support women to prepare for release. A group of prisoners in HMP Styal have been selected and trained, with links beginning to be established to the women's centres. However, the extent to which the peer element of the through the gate pathway can be fully-realised was in part dependent on decisions related to the Release on Temporary Licence (RoTL) of the mentors. This could not be achieved for any of the women and therefore precluded them from being able to go out into the community to visit the women's centres and work as true advocates for centres and support women through the gate.

4.3.5 A WHOLE SYSTEM APPROACH?

Whilst the centres are receiving referrals from all the pathways, participants felt there were a lot more women who were not being referred, particularly first time offenders, as one of the Alliance participants claimed; *"just touches the tip of the iceberg"* and another stated *"we're missing so many*

¹⁹ <http://www.merseysidecrc.co.uk/event-styal-aims-help-women-prisoners/>

²⁰ Approximately 350 women are released into Greater Manchester from Styal annually (figures provided by the GMCA). Release figures for the CRC and NPS were not made available as part of the evaluation.

women". The data has shown variation in the numbers of women being referred via the different pathways, with police referrals, the problem solving court and the 'through the gate' routes delivering lower numbers of women than may be expected. However, capacity to respond to increased number of referrals and ensuring engagement amongst the women referred was a challenge for the centres that was identified in the progress report (unpublished). There is an ongoing tension for the centres and the WSA between offering a service to *any* woman in need and ensuring that increased demand does not compromise their ability to deliver a service shaped around being needs-led, holistic, relational and not time-bound.

4.4 USE OF CUSTODY WITH GREATER MANCHESTER WOMEN

A central aim of the Whole System Approach is to reduce the use of custody with criminalised women across Greater Manchester. Underpinning this aim is a tacit agreement by all partners that a significant number of women enter prison who do not need to be there, and for whom such punishments are disproportionate and harmful.

Our ability to causally determine the impact of the WSA on the use of custody is limited, due to the complex nature of the multiple factors that may, or may not, determine such outcomes. What can be explored however are local and national custody trends, and specifically the use of custody with Greater Manchester women, as indicative of what might be happening. Alongside this, the qualitative reflections of staff, service users and partners about the WSA can help us to examine if and how the approach might impact on the use of custody for women.

The most recent national data²¹ reveals an annual increase in the receptions of women into prison, this is not only converse to the trend for men (down 7%), but is also almost entirely a reflection of the increased use of immediate custody for adult women aged 21 and over (up 4% annually to end June 2017). Similarly, there has been an increase in the number of women entering custody as a result of licence recall, which has increased by 10% across all sentences but 22% for those serving less than 12 months.

Local data, which provides a more reliable picture of what is happening for Greater Manchester women²², suggests that the number of women sentenced to custody has dropped during the last two years. The most recent data (period ending September 2017) suggests that the use of custody for CRC cases has shown an annual drop of 14%, and for NPS cases an annual drop of 32%²³.

²¹ *Offender Management Statistics*, source: <https://www.gov.uk/government/statistics/offender-management-statistics-quarterly-april-to-june-2017>

²² Local offender management statistics provided by the Greater Manchester CRC and North West NPS teams covering April 2015 to September 2017 (unpublished).

²³ These results were produced by calculating and comparing annual figures for use of custody in 2015-16 and 2016-17 as is used in the national OM statistics.

It should be noted, however, that these reductions reflect a similar trend in all sentences for women in Greater Manchester, which could point towards better diversion and earlier intervention to prevent women being sentenced. However, despite the proportion of all women sentenced where custody is the outcome fluctuating slightly, it has remained around 20-25%. Furthermore, the data for eighteen months to the end of September 2017 indicates that a proportion of women (96 women in total) sentenced to immediate custody continue to receive short sentences of under three months, thus they will serve less than six weeks in prison. That is approximately one quarter of the NPS cases and one fifth of the CRC cases.

In addition to women receiving an immediate custodial sentence, women may also enter prison due to breach of a previous community order or recall as part of their post custody licence. Local case management data suggests that, whilst there are quarterly fluctuations, the annual trend for use of breach in both the CRC and NPS cases has marginally increased (9.9% and 5.5% respectively). The use of recall reflects a more divergent trend, as the numbers of women recalled by the CRC has increased in the last year (by 10.8%), the number of NPS women recalled has dropped by 45.9%.²⁴

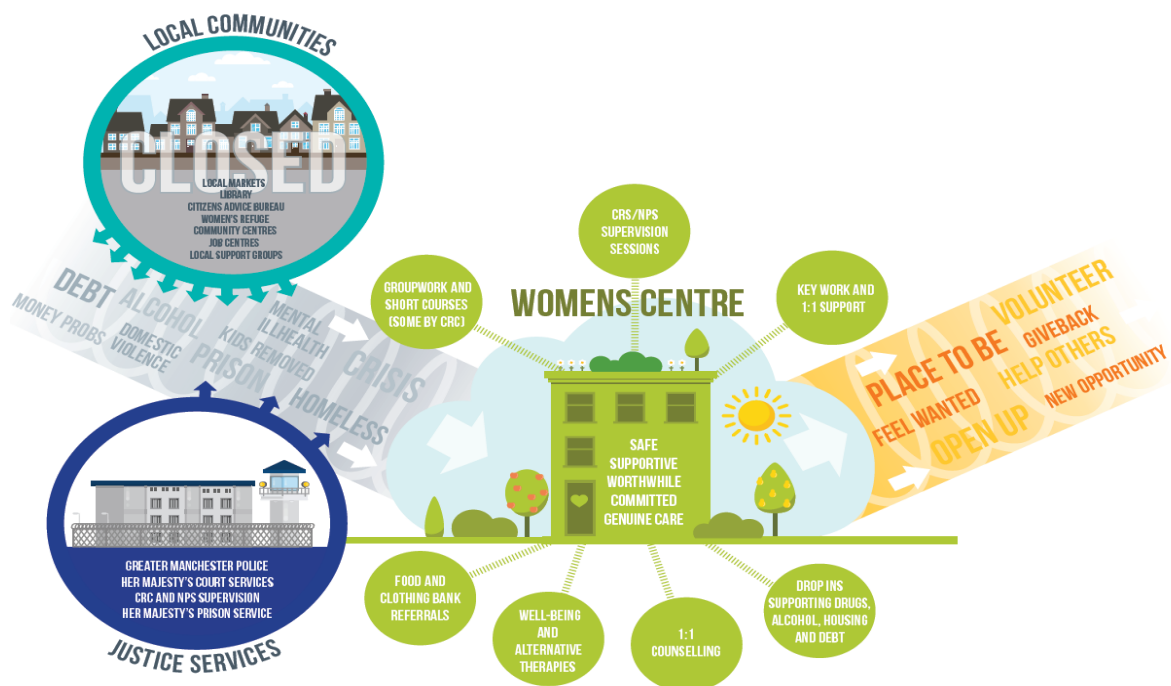
This analysis suggests that whilst the number of women sentenced to immediate custody in Greater Manchester is bucking the national trend the use of prison for women remains a stable proportion of all sentences, and the use of very short custodial sentences for women endures. Furthermore, the risk of custody for breach may be increasing, as well as the use of recall for women supervised by the CRC. These are worrying trends. Preventing the use of custody is a key aim of the WSA, thus working with women who are most at risk of breach or recall to improve engagement and provide support for the factors that may lead to them breaching their order or being recalled back to prison is vital in order to prevent the damaging effects of custody.

4.5 WHAT IT OFFERS TO WOMEN

The qualitative research has clearly confirmed whilst many of the women's life experiences may be characterised by marginalisation, stigma and isolation (captured in the next section which reflects the spiral of everyday and long standing challenges women face in their lives), only some of the women have been criminalised.

As captured previously the wider shift in the context of women's lives, means that the centres become a beacon of support in an otherwise challenging post austerity landscape.

²⁴ This is analysis of local cases management data provided by the CRC and NPS and compares the annual figures ending September 2016 to the year ending September 2017.



4.5.1 CONTEXT OF WOMEN'S LIVES

The experience and impact of the WSA cannot be understood without recognition of the shifting nature of the communities in which women using the centres live. These changes are characterised by the erosion of a wide range of services, which might have at one time responded to the welfare, health and economic challenges faced by the women. The impact of these changes have been highlighted in diagram 1 and the discussion in section 2.1.3.

Women who took part in the discussion group reported their local neighbourhoods changing, not knowing the people who live around you:

"Neighbours don't talk that much anymore more, when I grew up everyone knew everyone and everyone looked out for everyone and all that's disappearing" (Service user)

As well as an erosion of spaces within the community which women might have previously occupied, both socially and for support, such as the local market, the library, the benefits office, the citizens advice:

"I've lived in [area] all my life and I've seen it go from a bustling little market town, everyone's at the market on Saturday from around [area]...I've seen communities break down i.e. the markets gone, then the little shops go, then you've got the remnants of like Boots and major stores that can financially stay open. I've seen nurseries close...to the breakdown of societies, communities" (Service user)

In addition to this, the move to provide local government welfare and health services online, meaning applying for support online, receiving benefits confirmation by text and an inability to ask questions,

creates a challenge for women who are not computer literate. The remoteness of services can increase the sense of isolation, there is a loss of human connectedness and relational aspects to local services. This can create fear and anxiety in women, especially those for whom mental ill health is a challenge.

“I’ve had to claim for the first time in my life, but I haven’t got a clue...everything’s done online...but I’m not very computer literate and I just find it so daunting coz I thought where do you go and who do you speak to” (Service user)

In this context, the women’s centre can be a beacon. Providing an opportunity for relationships and support both to address a sense of interpersonal isolation but also in terms of supporting women to navigate and access the welfare, health and support services they desperately need. The relationships established with staff and other women in the centres can help women to build a sense of community, a safe space where women feel they belong and want to attend.

4.5.2 ARRIVING AT THE CENTRE

From the monitoring data collected for women between 1st September 2014 and the 31st March 2017, we can begin to build a picture of who is accessing the centres. The age profile of the women shows that the majority, 85% (n=2,149) of the women are aged over 25. The largest proportion of women from the overall cohort were aged between 30-39 (34%, n=847). As was highlighted in the interim report, small numbers of women under the age of 24 are accessing the centres (15%, n =366) across all the referral pathways. The monitoring data also reveals that the majority of the women accessing the centres were White (71%, n=2,209), with small proportions of Asian (2%, n=48), Black (1%, n=37) and Mixed / Multiple ethnic groups (2%, n=48) women accessing the centres. It is worth noting that 25% (n=774) of women did not provide their ethnicity status²⁵ and 0.5% (n=15) were reported as ‘other’. Despite the PSR team (as they were then known) securing funding from the Government Equalities Office in early 2016 to try and extend potential referral pathways and enhance equality of access to women’s centres, there still appears to be low numbers of Black, Asian and Minority Ethnic (BAME) women accessing the centres. Although local data on the demographics of women within the CJS was not available²⁶, it is well evidenced that BAME women are over represented in the prison population (Prison Reform Trust, 2013a; Lammy, 2017). Therefore, this may be an area that requires further investigation, as two years on from the interim report, the question remains about who the centres are for? Do all women have the same opportunity to access the centres? Are there other services available that may better meet the needs of young women or women from BAME backgrounds, as one participant acknowledged the low numbers of young women at their centre, but stated they often refer young women onto other services that are specifically tailored to working with young people. The introduction of the Service User Involvement Workers aim to focus on promoting

²⁵ These were either completed as ‘not stated / not provided’ or the cell was blank.

²⁶ There are also difficulties in comparing these figures to the wider female offending population, as data published by the Ministry of Justice is available for gender, age and ethnicity, but the intersections between these characteristics is not provided, which creates challenges exploring the different experiences of women.

the engagement and participation of BAME, young women and those with learning disabilities, which may begin to address some of this disparity.

The women arrive at the centres through a number of routes. For some they arrive at the centres as part of their community sentence or via a referral from contact with the police or on release from prison. For others, the centre is advocated for by other trusted professionals (i.e. mental health crisis team or substance misuse worker), whereas other women attend due to word of mouth, from within families or other women they know have been. Yet women report feeling anxious and nervous about attending the centres initially, a space that is often unknown to them. Even the women attending on a voluntary basis report a reluctance to attend initially. Once at the centre, however, the warm, caring and non-judgemental nature of the project staff and the fact that they feel 'no pressure to disclose' what has happened or their circumstances is significant. This not only affirms the importance of having choice and control over who is sharing information about your life but also the amount you engage, a difficult balance to strike when the centres are being used by women on community orders or released on licence.

Initial reluctance to disclose information about their experiences reveals the stigma women feel about the challenges they are experiencing in their lives, related to domestic violence, alcohol use, mental health, and how the anxieties of engaging with services are often rooted in this stigma. If these are some of the experiences of women who are engaging with the centres voluntarily, and without immediate contact with the criminal justice system, what does this reflect about the reality for women returning from prison or serving a community sentence. To what extent do they have the same choices to attend, to disclose, to engage? Their file and conviction history travels with them, adding to the stigma of the personal, social and economic challenges they may also be facing.

These tensions are an ongoing conundrum for services such as the women's centres, seeking to provide support to criminalised women. What more can be done to overcome these very real barriers? Ultimately, the alliance formed to respond to women in contact with the criminal justice system and reduce the various costs and harms of their criminalisation and offending. Whilst the centres are clearly benefiting a range of women, the Alliance and partners must retain a focus on ensuring that their approach is responsive to women who are most at risk of repeat criminalisation and imprisonment.

4.5.3 THE SPIRAL DOWNWARDS

Across the various methods used in this wave of the research, we chose to ask the women to position their involvement with the women's centre within a longer trajectory of their life - what is happening before they come into the centre, and then during or after their engagement with the services. The case studies in particular afforded the opportunity to reflect in some detail with women, to examine what long standing and day-to-day challenges they were facing and how this related to the support they received. The two case study interviews are presented in the timelines below.

CASE STUDY 1: 'LUCY'

LIFE CHALLENGES AND PRESSURES

"I grew up in a house with domestic violence, I grew up in a house with an alcoholic father who died when I was 19...at the time it almost felt like that was what was normal, that was what I'd seen growing up"

"I almost felt isolated in my own house with the children a lot of the time when my ex-partner left. I was suffering from anxiety and depression and I'm still taking medication for my depression, but it's nothing like it used to be. I feel like I can manage things now, I couldn't manage anything before. I couldn't even manage my own life, let alone look after my kids"

"I was addicted to negative relationships or harmful relationships...my first partner...I was 15 when I got with him and in them four years I'd gone from a normal school girl to raving alcoholic and quite a violent, angry, sad young woman really. In those four years I'd had quite a lot of traumatic experiences with this relationship. Domestic violence was a key point in it on both sides because I got to the point where I just started hitting him back because I thought 'you know what, I'm not putting up with it anymore'...drinking excessively, there was some drug taking back then which I'm very fortunate that I never really took off with, it was the drink really that got me because of how easily accessible it was..."

"It wasn't as bad as the first relationship but basically he would abandon me for days on end and I would feel like I was being abandoned for days or weeks and I wouldn't know where he was and I'd worry about him...I was in this relationship for three or four years and obviously this relationship wasn't as physically as bad as my first one, but emotionally for me it felt just as bad"

MISSED OPPORTUNITIES

"I think if I'm honest, if I'd have been introduced to the women's centre the first time my kids got took off me I might never have had them took off me the second time coz I was bad enough then, that if I'd have got the support it wouldn't have happened the second time and I wouldn't have lost a whole year out of their lives"

"Within a few months they'd taken them of me, the twins...but there'd been no sort of intervention...at the time I didn't really understand what was going on...but now I can see where the system kind of lets women down...instead of just attacking this woman with loads of threats, why not balance that with someone like [support worker at women's centre] coming in and saying 'why don't you come down to the centre to access some support and work with social services to get an hours break a week'. It could have been so different"

"The more women that understand what is happening to them at the time when their children are removed, what the process is, what's happening and how they can work to get to a point where that risk has been decreased enough for the children to go home and they work towards that instead of working towards proving themselves and jumping through hoops, I think they'll have women who will be able to care for their children for longer and stop children being in and out [of care], there's no stability...it's all or nothing. They're either taking the whole control over that child's life or they're leaving the mother to it 100%, there's no sort of middle ground with it"

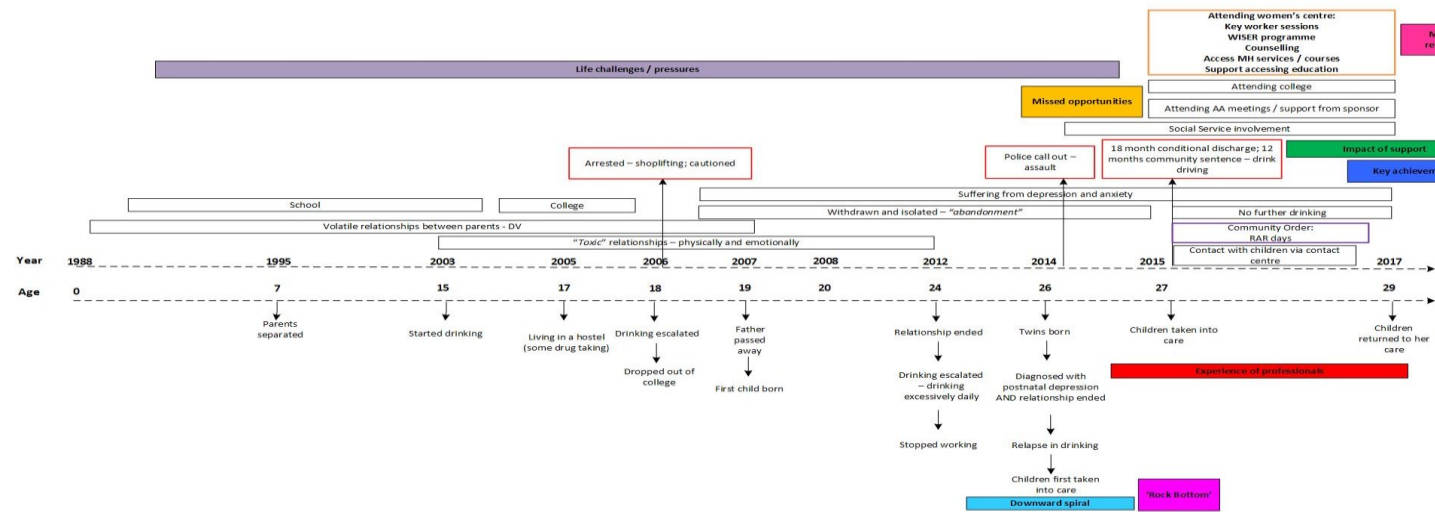
DOWNWARD SPIRAL

"Nothing had changed in that period for me, no extra support had come in, that was like a complete downward slope and there was nothing until I hit the very bottom of that slope to help me really and I was too sick to help myself at the time...other than I had stopped drinking so they had given me the children back but my coping strategies were none existent...I was incapable of asking people for help because I thought I shouldn't be asking people for help so I wouldn't actively seek help when I needed it, so I'd bottle it all up because that's what I'd done all along and nothing had changed. It was literally like waiting for a big explosion to happen...I didn't have the means to be able to do it differently"

'ROCK BOTTOM'

"I went into treatment not because I wanted to stop drinking but because I wanted everyone to stop falling out with me coz of my drinking...it wasn't on the agenda at that point in time. I don't think I had enough reason to want to stop then, I'd had no major, major consequences, I'd been arrested a couple of times and I'd been in trouble with my family but I'd never had any rock bottom I don't think until my children were taken off me, that was my rock bottom...I needed to get to that point where I completely and utterly surrendered, this does not work for me at all...when I crashed my car and I turned round, fortunately all I done was hit a parked car...but that was bad enough for me coz that was a taste of what could have happened...when I turned round and looked at the kids in the back...I was in black out and all of a sudden it was clear and I remember everything from that moment...I remember feeling so ashamed...and feelings of guilt...the police came and were quite brutal with me I'd say because to them I was just a woman drink driving and putting her kids lives at risk"

"I was coming off alcohol, I was shaking, I was sweating, I wasn't well at all. I was panicking coz I just realised my kids had gone and I was coming round from that and I was an alcoholic addicted to alcohol...and they did leave me for almost the full 24 hours...by the time I got out of there [police station] I was suicidal because I felt like there was no going back from this, you've been given the chance of having your kids given back to ya and you've not done what you needed to do and that was when I realised actually you know what I am wrong here, I shouldn't be doing this because I realised the danger I had put them in and put myself in and that was when I realised I needed to do something about it but I felt like it was too late now...I realised I had this major problem...from there I got by day by day"



EXPERIENCES OF PROFESSIONALS

"I'm not a fan of social services and it's not just because they took my kids off me and I think it's unfair because they took my children off me, because I was a danger to myself and a danger to my children because I was drinking to the point where I didn't know what I was doing. It was pretty obvious they had a right to come into my life. It was pretty obvious they had a right to remove my children, but there was no empathy, there was no kindness or consideration to the effects of what their job was doing to me and I felt like I was a bad person and I was being punished and spoken to like a piece of rubbish...I had to play a game to get my children home. I did it the right way. I stayed sober and in order to get them back I had to do what they said whether or not I believed it was the right thing for me to do, so when they said to me go to ADS after a year of sobriety, I wanted to say 'I've done this for 6 months, they've discharged me, I'm not going back but I didn't say that, I said I've done this for 6 months, they've discharged me when would you like me to go back. So I put myself back through the process of going through an alcohol service when I was a year sober because they said that was the right thing to do. That was probably one of the worst things for me to do when I was a year sober, but they don't look at me as the individual. They've got an alcoholic woman on this piece of paper. They're solution to that is to stick her in an alcohol service...AA worked for me, coming here [women's centre] worked for me, but they didn't want to know any of that...it was like I've got to get well and sort myself out doing what I know works for me but then I've also got to tick all these boxes for all these other people even though I know there not actually doing me any good"

"Social worker I've got now is really, really good...this is social worker number seven in two years...we're on the same side, she's working to support my family. It's always been child protection from the offset, which is risk assessing and removal of children. She works for the permanence team...I respect her and her job and think she does a really good job at supporting mums and families"

MEANINGFUL RELATIONSHIPS

"I started to become very withdrawn, so when I got better I started to build up relationships again, so [support worker at women's centre] was really key because she was the only professional that spoke to me with any kind of respect and empathy...I have met some nice social workers because I've got one now and I have met nice police officers, but unfortunately some interactions that I've had have not only been quite poor but they have left quite a big impact on me"

"She's [support worker at women's centre] amazing, she's one in a million. There's not a lot of people that I would have allowed that close...it was just the empathy and kindness that I didn't feel like I deserved at that time...and I certainly didn't get that anywhere else...to come here and get that was a very, very nice experience. Even though I was so low and so depressed, I found myself leaving here slightly better than I went in, never coming out worse...You get the feeling that she's a human being and genuinely wants to help ya...I know that it's not just a job for her. I want to be able to do that, to pass on what was given to me. It's amazing"

IMPACT OF SUPPORT

"I don't think I've ever been a bad person, I did at the time, I thought I was terrible but now I think I just needed some help and some support. It just took quite a while to get there, but I also wouldn't admit I needed help off people, so I suppose it's a bit of both...once I started receiving the help I needed and seeing and feeling the benefits, it was easy, it almost became normal to come here [women's centre], I came here actively seeking support...coming here getting that help and also that understanding...because everywhere else that I went I seemed to feel like I couldn't tell people I'd had my kids took off me and this [women's centre] is one of the only places really that I said I got my kids took off me and they said 'oh my god you poor thing', because here it's about me, it's not about keeping my kids safe, it's not about breaking the law, it's about me feeling safe and valued and accepted in this environment and I do and at that time this was the only place I felt like that"

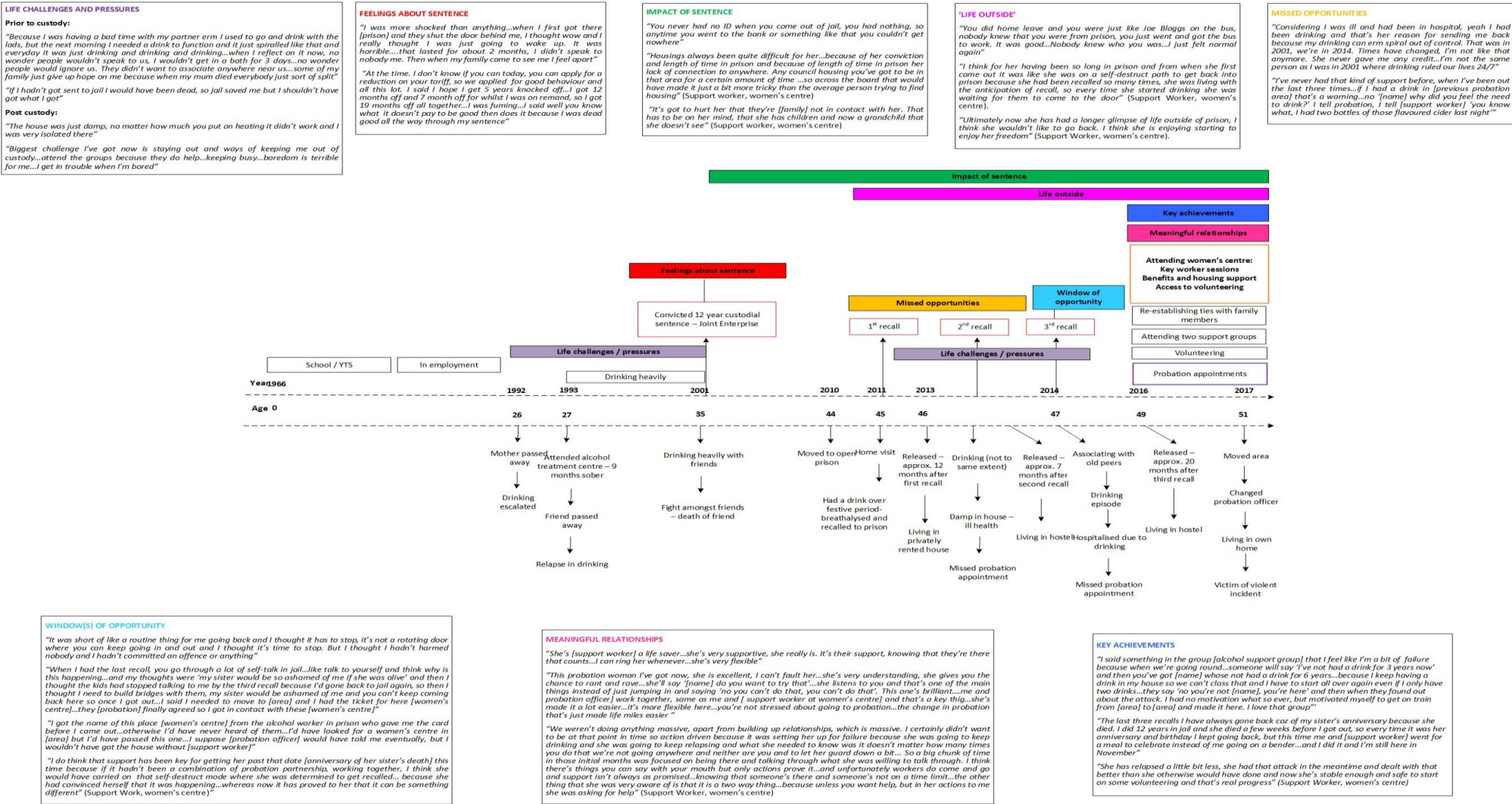
"She [support worker at women's centre] was really fighting my corner and her voice held a lot of weight in court because she was professional...she was someone that was trained to deal with these kind of issues and help people like me in these kind of situations that I was in...the benefits coming here, I can't stress how important it was to me...I don't come here coz I have to, I come coz I want to be here"

KEY ACHIEVEMENTS

"I've been sober, it will be two and half years in December since I've had a drink and my life's just completely turned around from what it was like...now I don't drink at all, I go to AA meetings, I come here [women's centre] erm and I've got a plan for my future like what I want to do, I want to go to University next year...it's just so rewarding and to feel like I actually have a purpose now and a future...I can be someone that can hopefully help other people to get better"

"I'm very proud now that I'll stay doing what I'm doing and my children won't have to ever witness anything like that in their lives...I'm pleased lucky that I've got these blank canvases now and build them a really, really good life and hopefully get a good job...and I've got all that to look forward to and 2.5 years ago I wanted to kill myself because I felt that was it"

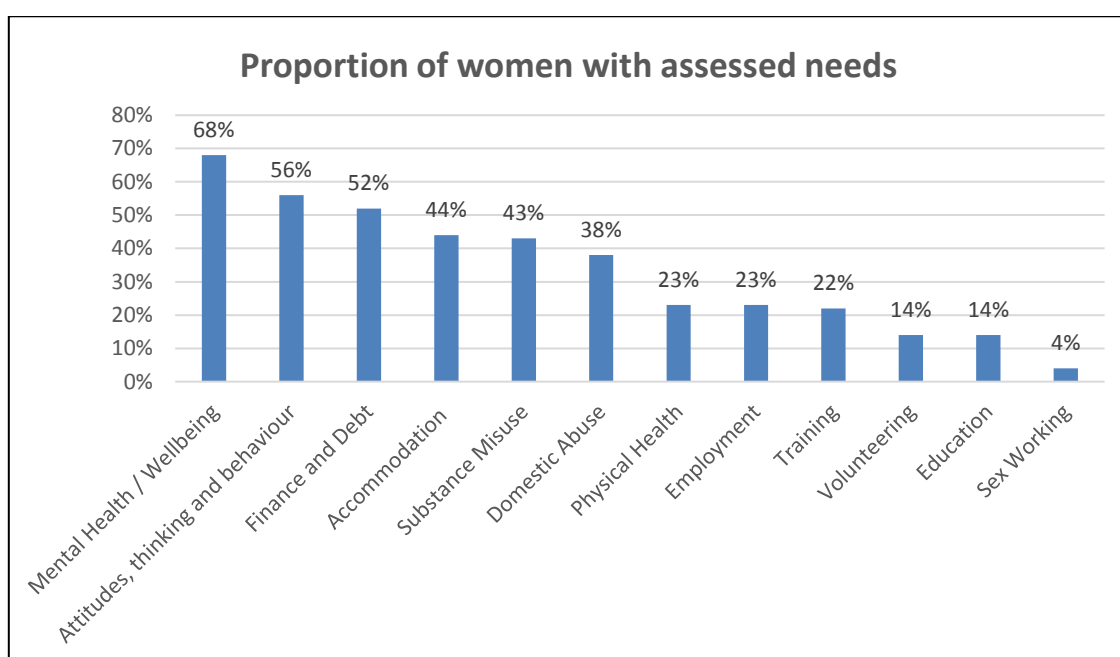
CASE STUDY 2: ‘KERRY’



The women involved in the focus group were also supported to consider their own experiences, and those of other women they had met at the centre, in this way – as being part of a timeline of events, feelings and experiences.

As is confirmed in the monitoring data, the women who arrive at the centre are living with a range of personal and social needs, often trying to cope without support *“I thought I was handling it...you don’t realise how low you’ve gone on that ladder”* (service user). The monitoring data reveals that over half (63%, n=1,054) of the women had between three and six needs. The breakdown of needs can be seen in the figure below. This shows the prevalence of mental health (68%, n=1,178), attitudes, thinking and behaviour (56%, n=968), issues around finance and debt (52%, n= 896), accommodation (44%, n =770) and substance misuse (43%, n=745) in the women’s lives. There are a significant number of records where no data was recorded²⁷ (47%, n=1,578) for the needs data, thus these figures may vary if this data was more complete.

Figure 2: Proportion of women with assessed needs



The interconnectedness of problematic levels of alcohol use, varying mental health conditions and domestic violence were reported by the women as being extremely common, both for them but also other women they know from the centres. Individual women then spoke to issues of debt and finance worries, problems with benefits, poverty and the need to use foodbanks, and a deep sense of isolation. The women representing the centres in the group discussion also spoke about how ‘easy it is to spiral downwards’ and the potential for any of these issues to reach crisis point, and then lead to homelessness and having children removed. They gave examples of other women at the centres who they could see further down the spiral, and tellingly they also reflected the potential of the women’s centres for diverting women from further criminalisation and out of the criminal justice system:

²⁷ This may be due to the fact women have not completed an assessment as they failed to engage, were drop ins or referred via the WISER programme or this data has not been recorded onto the monitoring spreadsheet.

“There are a couple of women that I’ve met in there [women’s centre] who didn’t need to go to prison, could have been put on a suspended sentence where they have to go once a week to the women’s centre or counselling, see probation workers...but they could be diverted there. If the police know the women’s centres are there for the criminal women they could divert women there before she gets a conviction which means she may not be able to work and generally she’s usually come from all this domestic violence” (Service user)

It is always a challenge to be able to quantify what the service has achieved in terms of prevention due to the multiple factors that may, or may not, have an impact on preventing women from coming into contact with the criminal justice system. Undoubtedly, some of the women now using the centres are accessing support in relation to a range of issues which could lead them to spiral downward, and thus potentially diverting them from criminalisation. But these women and practitioners feel there is much more to be done in this regard, that women are arriving at the centres unnecessarily criminalised and serving punishments, which are compounding the social and personal struggles they face.

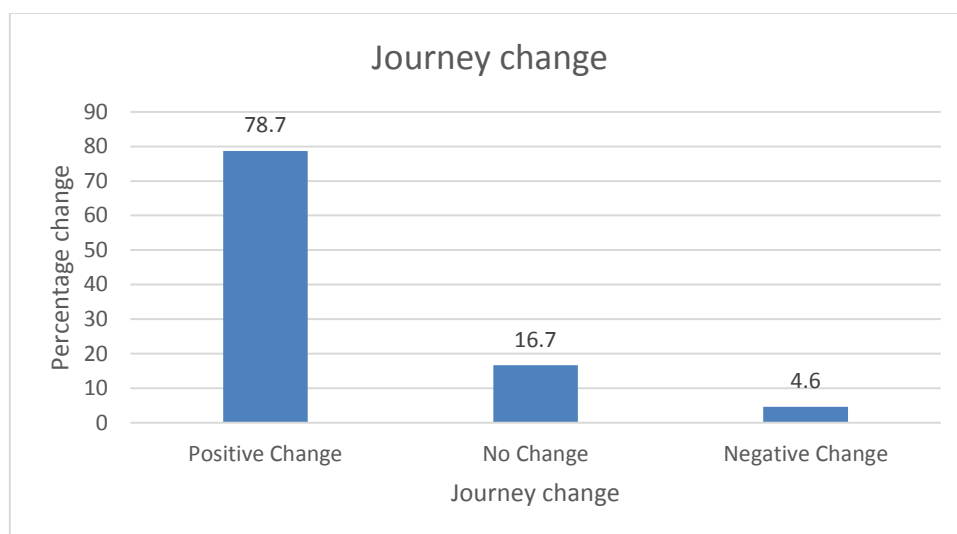
4.5.4 FINDING SUPPORT AND POSSIBILITIES: THE ROLE OF THE WOMEN’S CENTRES

The women’s timelines or trajectories, both from the case studies and women representing the centres in the discussion group, also revealed the potential for these collective women only spaces to contribute to an upward spiral in a woman’s life. The women’s centres collect data on the extent to which the women have made progress in relation to ten areas of their life (see figure 3 below) using the homelessness outcome star²⁸. The outcome star is a tool used to both measure and support progress against the ten different outcome areas. Each outcome area has a scale based on a model of change onto which the woman and project staff plot where the woman is in their journey. The tool is used at various stages during a woman’s engagement with a project in order to assess progress. The outcome star data collected by the women’s centres is presented in the chart below. In order to measure change, women needed to have completed more than one outcome star. 806 women had more than one outcome star. The analysis of progress is based on the first and last outcome star assessment completed by the woman. These figures should be treated with caution given the low numbers of women who had completed any assessments²⁹.

²⁸ <http://www.outcomesstar.org.uk/using-the-star/see-the-stars/homelessness-star/>

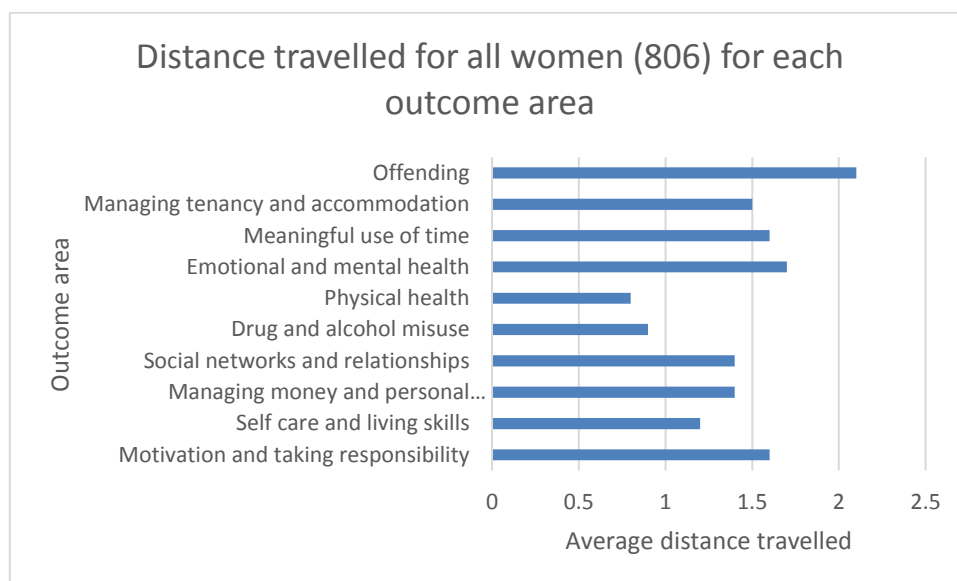
²⁹ Women may not have completed any stars due to non-engagement / disengagement or they may have only recently engaged with the centres, so had not sufficient time with the centres to complete the outcome star assessment or may have only completed one star so far.

Figure 3: Direction of travel for the women in relation to the outcome star data



The chart shows that the majority of women (79% (n=635) had experienced a positive change across the ten areas measured in the outcome star. It is important to note that these figures are based on an average across all ten areas, so some women may have made positive progress in some areas but not others. 17% (n=135) reported no change and 5% (n=37) experienced a negative change across the ten areas measured. Within the 'positive change' group there is some variation in the extent of positive change, with over half (59%, n=473) of the women moving one or two points on the scale. This may be due to the fact the majority of women (69%, n=556) had only completed two outcome star assessments. Following further engagement with the centres and assessments of their needs, greater progress may be recorded. In addition, figure 4 below shows the distance travelled for the women who had completed more than one star (n=806) for each of the ten outcome areas.

Figure 4: Average distance travelled for women who had completed more than one outcome star across the ten outcome areas



The chart shows that women had made the most progress in relation to offending, emotional and mental health, meaningful use of time and motivation and taking responsibility. This is promising to note, given the prevalence of mental health and wellbeing and attitudes, thinking and behaviour in women's lives. It also points to the difficulties in achieving progress in relation to some of the areas such as drug and alcohol misuse, which often requires intensive long-term support that may be beyond the current remit of the centres and the relationship between physical health and drug and alcohol misuse.

The women we spoke with supported these findings, reporting the centre was a 'lifesaver'. The benefits for individual women ranged from being able to open up, feel wanted and valued, to receiving practical support with housing or benefits and accessing wider services, such as counselling and support navigating the various agencies they would need to access if they were going to address some of the pressures they were experiencing. Access to suitable, safe decent housing is an on-going and long-standing concern reported by practitioners. Women's centres can provide crucial advocacy and support in helping women to navigate the systems that exist to ration the available social housing but there remains a significant shortage of suitable options.

There was also a sense from the women that the value of the centre should not be measured simply in terms of the things women do there, instead that the impact is about the fact that the space is there irrespective of what is happening to them elsewhere in their lives. This strong sense of an 'everyday space' that women can keep in touch with, a place to be where they feel safe and not judged was central to the value. This was further highlighted in the one of the case study interviews where the woman described attending the centre despite finishing her order "*I don't come here coz I have to, I come coz I want to be here*".

From the outset, there was also a recognition that the women valued the flexible nature of the support and regular availability of the space. Women's centre practitioners also reflected the need for this level of flexibility, particularly in the early stages of engagement:

"I see her every week, at least once and she must phone me on most weeks at least three times but it used to be almost every day. We don't have any time constraints on how often we see people, but because she has been so up and down and I do think she's lonely, I think she likes that level of contact" (Support Worker, women's centre)

Support not being 'time-limited' and restricted to a set number of sessions was also viewed as contributing towards their continued engagement with the centres. This type of support was not always available through other agencies:

"...the counselling I had here [women's centre], I can't describe how much it helped me, but it was all person centred... I reacted so well to that process because it was unlimited, I could have as many sessions as I wanted. If you go through the NHS, they'll say you've got five sessions and if you don't gel with your counsellor then it's not going to do any good...I think I ended up having 15 hours and I came to every session...she was absolutely brilliant...I think we worked on the deep rooted problems that I had around men, my childhood, my dad" (Service user)

Similarly, the relationships established with the women's centre staff were a central part of sustaining engagement, building trust and removing barriers to accessing support. This was particularly evident in the two case study interviews. The importance of relationships is well evidenced in relation to trauma-informed practice (Covington, 2007).

For some women the centre could also create opportunities for them to give back, to feel that they are contributing to the positive space for women in their community, with some women taking on more active roles in the centres whether through the service user group or volunteering opportunities.

4.6 ANALYSIS OF PROVEN (RE)OFFENDING

Analysis of the Police National Computer (PNC) Data allows us to explore the proven (re)offending for a cohort of women engaging with the women's centres, their previous involvement with the criminal justice system and the frequency of their offending following engagement with the centres.

Prior to analysis being carried out, the data files were cleaned and matched together in order for the patterns of convictions to be analysed. This process revealed a number of data issues that should be noted when interpreting these findings:

- Women engaging with the women's centres between April 2015 and January 2016 were asked to give their consent to access their records from the PNC. The records for this sub-set of 409 women, the *analysis cohort* was used for the (re)offending analysis. This cohort accounted for less than 15% of all women accessing the centres in the first two and half years of operation. It was **not possible to identify the extent to which this sub-set was representative of all the women accessing the centres**, therefore the findings need to be interpreted as **only applying to those included** in the (re)offending analysis and **cannot be generalised** to all of the women.
- Of the analysis cohort (409 women) there were 7,078 records on the PNC dataset and a PNC match was achieved for 344 women (84%). Therefore, 65 women (16%) did not have a PNC match. This may be due to the fact they do not have a criminal record or the information provided did not allow a match to be made.
- The matched dataset records the 'referral date' when women were referred to the centres and the first 'attendance date' when they first engaged with the women's centres. The first attendance date was used as the date of engagement with the women's centres. However, there were 40 women where there was no first attendance date. In these cases, the referral date was used as their date of engagement with the women's centres³⁰.
- The dataset contained a number of duplicate entries which fell into the following categories; the entry was a true duplicate – first attendance date on the same day; there were multiple referrals to the women's centres; there were multiple referrals to the women's centres including a period where the women were in custody. The duplicates resulted in 28 women being removed.

4.6.1 PROVEN (RE)OFFENDING

The (re)offending analysis was undertaken for 316 women (of the 409 analysis cohort) who accessed the women's centres between 1st September 2014 and 22nd December 2015. Proven (re)offending was based on the MoJ definition "proven re-offence is defined as any offence committed in a one year follow-up period and receiving a court

³⁰ There were 11 women whose attendance dates were readjusted to the 1st September 2014, as they were engaged with the projects during the pilot period, but their first attendance date preceded the start date.

conviction, caution, reprimand or warning in the one year follow up or a further six months waiting period”³¹. The 12 month follow-up period started the day after their first attendance date³² and ran for 365 days. The day after their first attendance was used because five women had a conviction logged on the PNC the same day as their first attendance date.

Overall, 17% (55 of the 316 women) were convicted of an offence in the 12 month follow up period³³. This figure is considerably lower than the re-offending figures for women receiving support from women’s centres throughout England (30% out of a cohort of 597 women) (Ministry of Justice, Justice Data Lab 2015). However, these figures need to be treated with caution, as it is not possible to verify the similarities between the two cohorts of women.

4.6.2 FREQUENCY OF OFFENDING

A measure of frequency of offending was calculated using the 12 months prior to engagement with the women’s centres and the 12 month follow up period following engagement with the women’s centres.

As indicated above, a minority of women (17%, n=55) reoffended and were convicted of an offence in the 12 months following engagement with the women’s centres, committing an average of 2.56 offences. When you compare this to a larger cohort of women (45.6%, n=144) who offended and were convicted in the 12 months prior to engagement, they committed an average of 2.19 offences.

Of the 55 women who committed and were convicted of an offence in the follow up period, 28 committed more offences, 9 committed the same and 18 committed fewer offences. 15 (53.6%) of the 28 women who committed more offences, had not offended in 12 months prior to engagement with the women’s centres. However, 13 of these women had offended previously (i.e. prior to the 12 months before engagement with the women’s centres). These figures should be treated with caution given we do not know what contact the women actually had with the centres and the extent of support received, for example they may have been referred and did not engage. Similarly, the analysis does not take account of the wider context to women’s lives or the seriousness of these (re)offences.

It is important that these findings are interpreted with care given the small numbers of women in the (re)offending analysis cohort (n=409), which account for less than 15% of all women who have accessed the centres in the first two and half years of operation. It is also important to note the analysis does not take into account other factors that might influence women’s lives and offending behaviours (e.g. homelessness, substance misuse, mental health issues). Given we know women in the criminal justice system can be particularly vulnerable and often have multiple and complex needs this needs to be borne in mind when interpreting these results.

³¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/218471/proven-reoffending-definition-measurement-260112.pdf

³² Or referral date where this was used as a proxy measure.

³³ An additional nine women breached orders and one committed other motoring offences during this period, as only notifiable offences are included in PNC reconviction analysis.

5. FUTURE DIRECTION

5.1 KEY REFLECTIONS

The issue over disparity of provision across the different women's centres is directly linked to variable levels of resourcing. The extent to which the women's centres in the Greater Manchester WSA are able to draw-in funding from sources outside of the WSA determines the extent to which they are able to offer high quality services. At a local level, a women's centre may have a range of charitable sources of funding (usually short-term and with specific priorities attached) and these will vary from one area to another. The services provided will reflect the success or otherwise of a particular centre's ability to draw-in additional resources to supplement what is provided via the WSA funding. Whilst the WSA aimed to deliver a consistent base level of service across the ten Local Authority areas, the variation between centres was noted by participants as they felt some women benefited from a greater level of service in some areas. To address this and provide a consistent, standard offer that can be easily translated from one area to another requires local commissioning of services that is truly 'joined up'. However, there is also a need to balance this alongside the requirements to respond to local demand and the needs of women in different areas.

There is a need for each Local Authority to see the potential for community women's centres to offer useful services to *all vulnerable women* not just those identified as a criminal justice cohort, and for funding mechanisms outside of the criminal justice system to be established. Local commissioning of 'joined-up' women's services (health; housing; family support; safeguarding) can offer a way forward³⁴. This could be an area in which the Alliance has a key role in articulating the principles of 'women centred working' and spelling out the potential benefits across Greater Manchester. The Alliance should foster its identity as an expert member of the WSA and a primary source of good practice and expertise in working to effectively support vulnerable women.

It can be argued that the experiences of the marginalised women, of victimisation in relation to DV, of substance misuse, of raising children in poverty, could reflect their risk of criminalisation, but equally the women attending the centre could be characterised purely as women in need of support. This creates a tension for the centres, again a longstanding conundrum (Clarke, 2004; Hedderman et al, 2008), **what services and resource should be available for criminalised women, versus women at risk of being criminalised, versus any marginalised women who need support.** The language and emphasis used here is purposeful. It seeks to go some way to reveal the tensions in categorising women into these groups – for many women it is as likely to be the actions of the system, in either failing to protect or support the process of criminalisation, that is as or more significant as any of her individual choices or behaviour. In fact, this understanding is implicit in the design of the WSA model, and its keenness to divert women from the criminal justice system and provide an alternative offer to them being criminalised. This is an ongoing challenge when funding and resources are limited, and the wider context means the women's centres may increasingly be called on by increasing numbers of women further away from the criminal justice system.

The women we spoke with revealed their own concerns that not only were women continuing to be being unnecessarily criminalised but also that the centres had set days and times allocated for women attending CRC or NPS appointments for example. Whilst we can recognise this may be driven by practical demands of only having probation staff on site on certain days and this being necessary to support recording of attendance for the purpose of their court

³⁴ <http://www.womencentredworking.com/>

order (and risk management or other processes related to being subject to punishment), in reality this may indicate a trend in how the centres are accessed by women that warrants further exploration. Whilst the dichotomy of women to 'criminalised' and 'at risk' is challenged by the overall principles of the WSA offer by the commitment to diversion and support, what is being delivered has the potential to reinforce divisions. For those women who are subject to punishment how they can and will (or, more significantly, will not) engage with the centres.

Sustaining the engagement of key partners and establishing links with those agencies that are not fully embedded in the WSA is needed for all aspects of the approach to deliver its key aims and ensure earlier intervention and support is available for key areas of need (for example, mental health). The police triage and problem solving court pathways offer real potential to **offer earlier support via women's centres and reduce the use of short-term sentences**. However, further work with the police and sentencers is needed to secure effective decriminalisation and diversion from prosecution. Such efforts may also involve work with NPS and CRC practitioners to ensure pre-sentence reports and discussions are able to support the offer of credible alternatives to short sentences. This will also require work to alter perceptions of the services as not being suitable for women with extensive histories of criminalisation. All this, is of course dependent upon consistent resourcing and provision of high quality services by all women's centres.

5.2 WHAT NEXT FOR THE WSA

In order for the WSA to achieve sustainability, there is an urgent need to identify a sustainable funding model so that the community women's centres can plan their delivery for the longer-term and provide a more equitable service across all areas (this links with building the confidence of NPS and sentencers that they can offer a credible alternative to short custodial sentences). Without the contribution of the women's centres and their expertise in what constitutes a gender-specific, holistic approach, the WSA will be fatally undermined and much needed services for vulnerable women will not be available. The general commitment to the whole system approach is evident across all partners, how this can be developed into improved and sustainable investment is the key challenge now.

There was an opportunity during the fieldwork for stakeholders to reflect on the steps required to support a more sustainable approach to delivery and funding of the WSA going forward. A range of practical steps were suggested, including: identifying 'champions' in all agencies and allocating suitable resources for those champions to drive forward the approach. Peer mentors being able to access ROTL so they can visit women's centres, build links and keep informed about what the centres offer and how they work in order to better support the through the gate service was also put forward. Similarly, having Magistrates more involved and better informed about what the centres offer and improved and continued communication around the WSA, what it offers and evidence of its outcomes were all felt to be important aspects of ensuring the sustainability of the approach amongst participants. The strong governance of the WSA was also highlighted by participants as being key for driving this approach forward and ensuring that it is on the agenda of all partner agencies to develop an area wide strategy and investment.

The WSA model is based on the notion that criminal justice agencies alone cannot provide the necessary resources and approaches to address the root causes of women's offending. In the wider context and need to reduce women's criminalisation, continued commissioning of women's centre services that address the needs of *all* vulnerable women offers greater potential for 'upstream' preventative work and could better provide the mix of influences and positive role-models that are conducive to rehabilitative change.

In the final evaluation report of the original Together Women government funded demonstration project – the first holistic, gender-specific model to be tested in the criminal justice sphere – the authors concluded that the available

data was “not sufficiently robust to allow firm conclusions about the impact of TW on later proven re-offending or other desirable social exclusion outcomes (e.g. reduced drug/alcohol use). This does not mean that these projects were not successful at achieving these, but it does mean that they can not be demonstrated with the data that was recorded by the Together Women centres and with PNC data” (Jolliffe, 2011). The (re)offending figures for this evaluation (17%) indicate lower (re)offending rates when compared to national (re)offending figures (30%), but as with the Together Women project, these results should be treated with caution, as it is not possible to verify similarities between the two groups. The report also highlighted the difficulties in demonstrating whether the project had reduced the risks of offending by those women it engaged who were not involved in the criminal justice system but deemed to be *at risk of offending*. The problems associated with evaluation of projects intended to reduce offending are spelled out in detail in the report. However, there is evidence from other sources that suggests multiple benefits may accrue from what is described as ‘women-centred working’.³⁵ As part of our evaluation, the outcome star data suggests positive progress is being made by the women engaging with the centres. The accounts of women also reveal benefits from engaging with the women’s centres. These include improved feelings about their self in terms of feeling valued, less shame and guilt and improved confidence; improvements in health, both mental health and physical health from reducing alcohol or drug use and reduced isolation; and developing practical skills through education, employment or volunteering opportunities.

If the Greater Manchester WSA can effectively engage wider partners – health (MH in particular); education, training and employment providers; housing providers; and family support services – and find ways of engaging commissioners in these areas to participate in co-commission services for marginalised and criminalised women, there is the possibility of a reduction in criminalising women. Strong working relationships between the various agencies were considered even more important now due to the complexity of the Transforming Rehabilitation landscape.

The Alliance may be strengthened by such an approach and it is crucial that the voices they represent are heard at strategic decision-making level. The Alliance should continue to be supported to participate in multi-agency decision-making forums, with their expertise and experience used to ensure that service design and commissioning processes are informed by a women-centred approach. The Alliance also has a critical role in raising awareness of the benefits of women-centred working, particularly with the range of organisations that aim to work with vulnerable women.

A further valuable aspect of strengthening the Alliance lies in its capacity to collectively bid for funding from charitable sources and in so doing both increase the range of service provision and add value to the core commissioned model. The success of drawing down funding streams, such as the Tampon Tax Fund, administered by Department for Digital, Culture, Media and Sport, or the Big Lottery funds, offer significant opportunities to consortia of women’s organisations that can operate at scale across regions. The potential added value contribution of the charity sector should not be under-estimated but in order to capitalise on this a sustainable commissioning model must be developed alongside these charitable awards.

³⁵ <http://www.womencentredworking.com/benefits/>

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7. APPENDIX 1 – FIELDWORK ACTIVITIES

PHASE	FIELDWORK UNDERTAKEN
Phase 1: Jan 2015 – Dec 2015	<ul style="list-style-type: none"> • Project initiation and documentary review • In-depth semi-structured interviews with service users (n= 19) • In-depth semi-structured interviews with women's centre project staff (n=25) • In-depth semi-structured interviews with partner agencies (n=14) • In-depth semi-structured interviews with strategic stakeholders (n=4) • Analysis of performance monitoring data
Phase 2: Jan 2016 – Dec 2016	<ul style="list-style-type: none"> • Capacity assessment exercise – interviews with women's centre staff (n= 7) • Observations of the peer mentoring scheme in Styal • In-depth semi-structured interviews with prisoner peer mentors (n=5) • In-depth semi-structured interviews with staff in Styal (n=3) • Interim (re)offending analysis
Phase 3: Jan 2017 – Dec 2017	<ul style="list-style-type: none"> • Learning Workshop with members of the Women's Alliance (n=10) • Learning Workshop with Multi-Agency Stakeholders (n=4) • Telephone interviews with Multi-Agency Stakeholders (n=2) • Discussion group with women accessing the women's centres (n=4) • Narrative Case Studies with women accessing the women's centre (n=2) • Analysis of performance monitoring data • Full (re)offending analysis